Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ALABAMA	_	
Case number (if known)	_ Chapter you are filing under:	
	☐ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	Chapter 13	☐ Check if this is an amended filing

## Official Form 101

# Voluntary Petition for Individuals Filing for Bankruptcy

12/22

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself						
		About Debtor 1:		About Debtor 2 (Spouse Only in a Joint Case):			
1.	Your full name						
	Write the name that is on your government-issued	Robert First name		Paige First name			
	picture identification (for example, your driver's	Ryan		Laken			
	license or passport).	Middle name		Middle name			
	Bring your picture identification to your	Pike		Pike			
	meeting with the trustee.	Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)				
2.	All other names you have used in the last 8 years						
	Include your married or maiden names and any assumed, trade names and doing business as names.						
	Do NOT list the name of any separate legal entity such as a corporation, partnership, or LLC that is not filing this petition.						
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-0179		xxx-xx-6601			

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):		
4. Your Employer Identification Number (EIN), if any.		EIN	EIN		
Spru			If Debtor 2 lives at a different address:		
		4875 Hwy 22 Spruce Pine, AL 35585 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code		
Franklin County			County		
	If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.		If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.		
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code		
6.	Why you are choosing this district to file for	Check one:	Check one:		
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.		
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)		

		Paige Laken Pike					Case number (if known)	
Dor	4.0-	Tall the Count About 1	/a Damless	-4 C-				
Par 7.		Tell the Court About \ chapter of the				each, see <i>Notice Required by</i>	11 U.S.C. § 342(b) for Individuals Filing for E	Bankruptcy
		ruptcy Code you are sing to file under				age 1 and check the appropria		
	CHOC	ising to me under	☐ Chapter	7				
			☐ Chapter	11				
			☐ Chapter	12				
			■ Chapter	13				
8.	How	you will pay the fee	about order. a pre-	how yo If your printed	ou may pay. Typica attorney is submitt address.	ally, if you are paying the fee you	ck with the clerk's office in your local court for ourself, you may pay with cash, cashier's che alf, your attorney may pay with a credit card on, sign and attach the <i>Application for Individ</i>	ck, or money or check with
			The F ☐ I require but is applie	iling Fe est that not request to you	e in Installments (on the my fee be waive uired to, waive you ur family size and you	Official Form 103A).  d (You may request this option  fee, and may do so only if you  fou are unable to pay the fee i	n only if you are filing for Chapter 7. By law, a bur income is less than 150% of the official poin installments). If you choose this option, you cial Form 103B) and file it with your petition.	a judge may, overty line that
				pnoatro	on to Have the One	pior i i i i i i i i i i i i i i i i i i	olari oliri 1665) ana me k war your pealon.	
9.	bank	you filed for ruptcy within the	■ No.					
	iast	3 years?	☐ Yes.	Notrict.		When	Casa number	
				District		When When		
				District District		when When	0	
				)istrict		wileli	Case Hullibel	
10.		any bankruptcy	■ No					
	filed not f you,	s pending or being by a spouse who is iling this case with or by a business ner, or by an ate?	☐ Yes.					
			[	Debtor			Relationship to you	
			Γ	District		When	Case number, if known	
			[	Debtor			Relationship to you	
			[	District		When	Case number, if known	
11.		ou rent your lence?	■ No.	Go to li	ine 12.			
	10310		☐ Yes.	Has yo	our landlord obtaine	ed an eviction judgment agains	st you?	
					No. Go to line 12.			
					Yes. Fill out <i>Initia</i> this bankruptcy pe		Judgment Against You (Form 101A) and file	it as part of

	otor 1 Robert Ryan Pike otor 2 Paige Laken Pike				Case number (if known)			
Par	t 3: Report About Any Bo	usinesses	You Owr	ı as a Sole Propriet	or			
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	■ No. Go to Part 4.					
		☐ Yes.	Name and location of business					
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name					
	If you have more than one sole proprietorship, use a separate sheet and attach		Number, Street, City, State & ZIP Code					
	it to this petition.		Chec	k the appropriate box	x to describe your business:			
			☐ Health Care Business (as defined in 11 U.S.C. § 101(27A))		ness (as defined in 11 U.S.C. § 101(27A))			
				Single Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))			
				Stockbroker (as de	efined in 11 U.S.C. § 101(53A))			
			Commodity Broker (as defined in 11 U.S.C. § 101(6))					
				None of the above				
If you are filing under Chapter 11, the court must know whether you are a small business debtor or a debtor choproceed under Subchapter V so that it can set appropriate deadlines. If you indicate that you are a small business debtor or a debtor as defined by 11 U.S. C. § 1182(1)?  For a definition of small				can set appropriate deadlines. If you indicate that you are a small business debtor or bchapter V, you must attach your most recent balance sheet, statement of operations, ne tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C.				
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	Code					
		☐ Yes.			11, I am a small business debtor according to the definition in the Bankruptcy Code, and d under Subchapter V of Chapter 11.			
		☐ Yes.			11, I am a debtor according to the definition in § 1182(1) of the Bankruptcy Code, and I Subchapter V of Chapter 11.			
Par	t 4: Report if You Own or	r Have Any	/ Hazardo	ous Property or Any	y Property That Needs Immediate Attention			
14.	Do you own or have any	■ No.						
	property that poses or is alleged to pose a threat	☐ Yes.						
	of imminent and identifiable hazard to public health or safety?		What is	the hazard?				
	Or do you own any property that needs immediate attention?			liate attention is why is it needed?				
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is	s the property?				
					Number, Street, City, State & Zip Code			

Debtor 1 Robert Ryan Pike Debtor 2 Paige Laken Pike

Case number (if known)

#### Part 5:

**Explain Your Efforts to Receive a Briefing About Credit Counseling** 

#### 15. Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

#### Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

### Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court. About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

### Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

	otor 1 Robert Ryan Pike				Case number	(if known)			
Par			Reporting Purposes						
	What kind of debts do	16a.	16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an						
	you have?		individual primarily for a personal, family, or household purpose."  □ No. Go to line 16b.						
			Yes. Go to line 17.						
		16b.		Are your debts primarily business debts? Business debts are debts that you incurred to obtain					
			money for a business or investment or through the operation of the business or investment.						
			☐ No. Go to line 16c.						
		40-	☐ Yes. Go to line 17.	4h-at-au		dalue			
		16c.	State the type of debts you owe	that are not consur	mer debts or business	debts			
17.	Are you filing under Chapter 7?	■ No.	I am not filing under Chapter 7. 0	Go to line 18.					
	Do you estimate that after any exempt property is excluded and	☐ Yes.	I am filing under Chapter 7. Do y are paid that funds will be availa			rty is excluded and administrative expenses			
	administrative expenses are paid that funds will		□ No						
	be available for distribution to unsecured creditors?	I	Yes						
18.	How many Creditors do	<b>1</b> -49		<b>1</b> ,000-5,000		<b>2</b> 5,001-50,000			
	you estimate that you owe?	□ 50-99		□ 5001-10,000 □ 10,001-25,0		☐ 50,001-100,000 ☐ More than100,000			
		☐ 100-1 ☐ 200-9		<b>1</b> 0,001-25,0	00	□ More than 100,000			
19.	How much do you	<b>\$</b> 0 - \$	 \$50.000	□ \$1,000,001	- \$10 million	☐ \$500,000,001 - \$1 billion			
	estimate your assets to be worth?	□ \$50,001 - \$100,000		□ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million		□ \$1,000,000,001 - \$10 billion			
		□ \$100,001 - \$500,000 □ \$500,001 - \$1 million			01 - \$500 million	☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion			
20.	How much do you	□ \$0 - \$	 \$50,000	□ \$1,000,001	- \$10 million	☐ \$500,000,001 - \$1 billion			
	estimate your liabilities to be?		001 - \$100,000	□ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million		□ \$1,000,000,001 - \$10 billion			
		□ \$100,001 - \$500,000 □ \$500,001 - \$1 million			)1 - \$100 million )1 - \$500 million	☐ \$10,000,000,001 - \$50 billion☐ More than \$50 billion			
Par	t 7: Sign Below								
	you	I have ex	xamined this petition, and I declare	e under penalty of p	perjury that the inform	ation provided is true and correct.			
		If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11,							
		United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.							
			orney represents me and I did not port, I have obtained and read the no			an attorney to help me fill out this			
		I reques	t relief in accordance with the chap	pter of title 11, Unite	ed States Code, speci	fied in this petition.			
		I unders bankrup and 357	tcy case can result in fines up to \$	ncealing property, of 250,000, or impriso	or obtaining money or onment for up to 20 ye	property by fraud in connection with a ears, or both. 18 U.S.C. §§ 152, 1341, 1519,			
		/s/ Rob	ert Ryan Pike		/s/ Paige Laken F				
			Ryan Pike re of Debtor 1		Paige Laken Pike Signature of Debtor				
		Execute	d on June 11, 2024 MM / DD / YYYY		Executed on MM /	e 11, 2024 CDD/YYYY			

Debtor 1 Debtor 2	Robert Ryan Pike Paige Laken Pike					
•	attorney, if you are ted by one	under Chap	ter 7, 11, 12, or 13 of title 11, l	United States Code, a	and have e	informed the debtor(s) about eligibility to proceed explained the relief available under each chapter debtor(s) the notice required by 11 U.S.C. § 342(b)
•	e not represented by ey, you do not need s page.	and, in a ca		olies, certify that I have		rledge after an inquiry that the information in the
		/s/ Tanya	H. McCalpin		Date	June 11, 2024
		Signature of	Attorney for Debtor			MM / DD / YYYY
		Tanya H. I	<b>McCalpin</b>			
		Printed name				
			es, Sykstus, Tanner & M	cNutt, P.C.		
		Firm name	. • .			
		121 S Cou				
		Florence,				
		Number, Street,	City, State & ZIP Code			
		Contact phone	256-760-1010	Emai	il address	jaday@bondnbotes.com
		Bar number & S	tate			

311	in this inform	nation to identify your	rasa:				
	otor 1	Robert Ryan Pike					
Der	noi i	First Name	Middle Name	Last Name			
	otor 2	Paige Laken Pike	Middle None	Lost Nama			
	use if, filing)		Middle Name	Last Name			
Uni	ted States Ba	inkruptcy Court for the:	NORTHERN DISTRICT	OF ALABAMA			
	e number _						
(If Kn	own)					_	if this is an ded filing
Su Be a	mmary c s complete a mation. Fill	and accurate as possib out all of your schedule	le. If two married people es first; then complete th	are filing together, both are e information on this form. It the box at the top of this pa	equally responsible for	or supplyin	
Par	1: Summ	arize Your Assets					
						Your as	ssets f what you own
1.	Schedule A 1a. Copy lin	<b>A/B: Property</b> (Official Force 55, Total real estate, from	orm 106A/B) om Schedule A/B			\$	0.00
	1b. Copy lin	e 62, Total personal prop	perty, from Schedule A/B			\$	43,754.00
	1c. Copy lin	e 63, Total of all property	on Schedule A/B			\$	43,754.00
Par	2: Summ	arize Your Liabilities					
							abilities you owe
2.			aims Secured by Property nn A, <i>Amount of claim,</i> at t	(Official Form 106D) the bottom of the last page of I	Part 1 of Schedule D	\$	35,000.00
3.			Unsecured Claims (Official 1 (priority unsecured claim	Form 106E/F) s) from line 6e of <i>Schedule E/</i>	F	\$	0.00
	3b. Copy th	ne total claims from Part 2	2 (nonpriority unsecured cl	aims) from line 6j of <i>Schedule</i>	E/F	\$	23,952.00
					Your total liabilities	\$	58,952.00
Par	t 3: Summ	arize Your Income and	Expenses				
4.		Your Income (Official Fo		I		\$	6,521.00
5.	Schedule J	Your Expenses (Official	Form 106J)			\$	5,721.00
	copy you	morning expended morn in	10 220 01 00/1000/10 0				

- 6. Are you filing for bankruptcy under Chapters 7, 11, or 13?
  - No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.
  - Yes
- 7. What kind of debt do you have?
  - Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
  - Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

page 1 of 2

Debtor 1	Robert Ryan Pike
Debtor 2	Paige Laken Pike

Case number (if known)

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

7,728.00

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total claim	
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	0.00

Fill in this info	rmation to identify your	case and this filing:			
Debtor 1	Robert Ryan Pike	•			
	First Name		st Name		
Debtor 2 (Spouse, if filing)	Paige Laken Pike		st Name		
(Spouse, il lilling)	i list Name	Middle Name Las	it ivallie		
United States B	Sankruptcy Court for the:	NORTHERN DISTRICT OF ALABAM	1A		
Case number					☐ Check if this is an
- Cass Harrison					amended filing
Official Fo	orm 106A/B				
Schedu	le A/B: Prop	erty			12/15
information. If mo Answer every que	ore space is needed, attach estion.	te as possible. If two married people are a separate sheet to this form. On the top	o of any additional pag		
. Do you own or	have any legal or equitable	e interest in any residence, building, land	d, or similar property?		
■ No. Go to Pa	art 2.				
_	is the property?				
Tes. Where	is the property:				
Part 2: Describ	e Your Vehicles				
Do vou own lo	aca ar hava lagal ar agu	sitable interest in any vehicles, who	thar thay are registe	urad ar nat2 Include any v	ahialaa way ayya that
		itable interest in any vehicles, whe e, also report it on Schedule G: Exect			enicles you own that
			•	•	
3. Cars, vans, t	rucks, tractors, sport ut	ility vehicles, motorcycles			
□ No					
■ Yes					
<b>—</b> 103					
3.1 Make:	JEEP	Who has an interest in the pro	nerty? Chock and	Do not deduct secured cl	aims or exemptions. Put
Model:	COMPASS	Debtor 1 only	porty: Check one	the amount of any secure Creditors Who Have Clair	
Year:	2021	Debtor 2 only			, , ,
	ate mileage:	Debtor 1 and Debtor 2 only		Current value of the entire property?	Current value of the portion you own?
Other info		☐ At least one of the debtors a	nd another	ontillo proporty.	portion you own.
		Check if this is community (see instructions)	property	\$21,663.00	\$21,663.00
	TOYOTA			Do not deduct secured cl	aims or exemptions. Put
3.2 Make:	TOYOTA	Who has an interest in the pro	perty? Check one	the amount of any secure	ed claims on Schedule D:
Model:	4RUNNER	Debtor 1 only		Creditors Who Have Clair	ms Secured by Property.
Year:	2005	Debtor 2 only		Current value of the	Current value of the
• • •	ate mileage:	Debtor 1 and Debtor 2 only		entire property?	portion you own?
Other info	rmation:	At least one of the debtors a	nd another		
		☐ Check if this is community	property	\$6,313.00	\$6,313.00
1		(eap instructions)			

		aige Laken Pike	с	ase number (if known)	
3.3	Make: Model: Year:	KAWASAKI DIRTBIKE 2023	Who has an interest in the property? Check one ☐ Debtor 1 only ☐ Debtor 2 only	the amount of any s Creditors Who Have	red claims or exemptions. Put ecured claims on Schedule D: e Claims Secured by Property.
	Approxir	nate mileage:	Debtor 1 and Debtor 2 only	Current value of the entire property?	ne Current value of the portion you own?
		formation:	☐ At least one of the debtors and another	ontillo proporty.	portion you own.
			☐ Check if this is community property (see instructions)	\$4,000.	\$4,000.00
Ex			TVs and other recreational vehicles, other vehicles, aronal watercraft, fishing vessels, snowmobiles, motorcycle		
.p	ages you	have attached for Part 2.	ou own for all of your entries from Part 2, including a Write that number here		\$31,976.00
		be Your Personal and House			
			able interest in any of the following items?		Current value of the portion you own?  Do not deduct secured claims or exemptions.
E		goods and furnishings Major appliances, furniture, scribe	linens, china, kitchenware		
		HOUSEHO	OLD GOODS AND FURNISHINGS		\$875.00
E	lectronics Examples: I No I Yes. De	Televisions and radios; aud including cell phones, came	lio, video, stereo, and digital equipment; computers, printe eras, media players, games	ers, scanners; music co	llections; electronic devices
		ELECTRO	NICS		\$375.00
			ntings, prints, or other artwork; books, pictures, or other ar ilia, collectibles	t objects; stamp, coin, o	or baseball card collections;
	INo Yes. De	scribe			
E	xamples:	for sports and hobbies Sports, photographic, exerc musical instruments	cise, and other hobby equipment; bicycles, pool tables, go	lf clubs, skis; canoes a	nd kayaks; carpentry tools;
	I No I Yes. De	scribe			
	Firearms Examples No Yes. De		mmunition, and related equipment		

Official Form 106A/B Schedule A/B: Property page 2

Debtor 1 Debtor 2	Robert Ryan Pike Paige Laken Pike		Case number (if known	n)
11. Cloth		ura laathar aasta daai	gner wear, shoes, accessories	
□ No	ipies. Everyday ciotnes, ii	urs, leather coats, desig	gner wear, snoes, accessories	
Yes	. Describe			
	WEA	RING APPAREL		\$350.00
12. <b>Jewel</b> Exam		ostume jewelry, engag	ement rings, wedding rings, heirloom jewelry, watches, gems	, gold, silver
■ No	, , , , , , , , , , , , , ,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	3.,	<b>3</b> . 1, 1
☐ Yes	. Describe			
	arm animals	orses		
■ No				
☐ Yes	. Describe			
14. <b>Any o</b>	other personal and hous	ehold items you did n	not already list, including any health aids you did not list	
■ No				
⊔ Yes	. Give specific informatio	n		
15 8 4 4	the deller value of all or	f varr antrias from Da	out 2 including any autoica for pages you have attached	
			rt 3, including any entries for pages you have attached	\$1,600.00
	escribe Your Financial Ass			
Do you o	wn or have any legal or	equitable interest in a	any of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
40.0.1				or oxomptions.
16. <b>Cash</b> <i>Exan</i>	nples: Money you have in	your wallet, in your hor	me, in a safe deposit box, and on hand when you file your pet	ition
■ No				
☐ Yes				
Exan			unts; certificates of deposit; shares in credit unions, brokerage with the same institution, list each.	houses, and other similar
□ No ■ Yes			Institution name:	
_ 103	·······			
	17.1	CHECKING	VENMO	\$1.00
	17.2	CHECKING	CASH APP	\$1.00
		OUEOWNO	CDec	¢476.00
	17.3	. CHECKING	CB&S	\$176.00 
	s, mutual funds, or publ nples: Bond funds, investr		kerage firms, money market accounts	
■ No		landikudina na inawana		
⊔ Yes		Institution or issuer n	anc.	
joint	oublicly traded stock and venture	d interests in incorpo	rated and unincorporated businesses, including an inter	est in an LLC, partnership, and
■ No □ Yes	. Give specific informatio	n about them		
	rm 106A/B	ασσατ αποππ	Schedule A/B: Property	page 3

Debtor 1 Debtor 2	Robert Ryan Pike Paige Laken Pike	Case	number (if known)
	Name of entity:	% of	ownership:
Negot Non-ri ■ No	tiable instruments include personal checks	negotiable and non-negotiable instruments in cashiers' checks, promissory notes, and money on transfer to someone by signing or delivering then	
	ment or pension accounts	(k), 403(b), thrift savings accounts, or other pension	n or profit-sharing plans
■ Yes.	List each account separately.  Type of account:	Institution name:	
	401(K)	401(K)	\$10,000.00
Yours		de so that you may continue service or use from a cent, public utilities (electric, gas, water), telecommu	
		Institution name or individual:	
■ No □ Yes.  24. Interes 26 U.S. ■ No □ Yes.  25. Trusts	Issuer name and description its in an education IRA, in an account in inc. §§ 530(b)(1), 529A(b), and 529(b)(1).  Institution name and description	money to you, either for life or for a number of years on.  In a qualified ABLE program, or under a qualified iption. Separately file the records of any interests.1  Ity (other than anything listed in line 1), and right	I state tuition program.  1 U.S.C. § 521(c):
■ No □ Yes.	Give specific information about them		
Exam ■ No	es, copyrights, trademarks, trade secret ples: Internet domain names, websites, pro- Give specific information about them	s, and other intellectual property oceeds from royalties and licensing agreements	
<i>Exam</i> ■ No	ses, franchises, and other general intan ples: Building permits, exclusive licenses, Give specific information about them	gibles cooperative association holdings, liquor licenses, p	rofessional licenses
Money or	property owed to you?		Current value of the portion you own? Do not deduct secured claims or exemptions.
■ No	funds owed to you  Give specific information about them, incl	uding whether you already filed the returns and the	tax years
■ No		sal support, child support, maintenance, divorce se	ttlement, property settlement

Official Form 106A/B Schedule A/B: Property page 4

	ebtor 1 ebtor 2	Robert Ryan Pike Paige Laken Pike	Case number (if known)	
	Examp _	imounts someone owes you iles: Unpaid wages, disability insurance payments, disability be benefits; unpaid loans you made to someone else	nefits, sick pay, vacation pay, workers' compe	nsation, Social Security
	■ No □ Yes.	Give specific information		
31.		ts in insurance policies les: Health, disability, or life insurance; health savings account	(HSA); credit, homeowner's, or renter's insurar	nce
	■ No			
	⊔ Yes.	Name the insurance company of each policy and list its value.  Company name:	Beneficiary:	Surrender or refund value:
	If you a	erest in property that is due you from someone who has di are the beneficiary of a living trust, expect proceeds from a life in the has died.		eive property because
		Give specific information		
	_Examp	against third parties, whether or not you have filed a lawst		
	■ No □ Yes.	Describe each claim		
34.	Other o	ontingent and unliquidated claims of every nature, includi	ng counterclaims of the debtor and rights to	set off claims
	■ No □ Yes.	Describe each claim		
35.	Any fin	ancial assets you did not already list		
	■ No □ Yes.	Give specific information		
36		he dollar value of all of your entries from Part 4, including a		\$10,178.00
Pa	rt 5: Des	scribe Any Business-Related Property You Own or Have an Interest	t In. List any real estate in Part 1.	
37.	Do you o	own or have any legal or equitable interest in any business-related	property?	
	No. Go			
L	→ Yes. G	o to line 38.		
Pa		scribe Any Farm- and Commercial Fishing-Related Property You Ov ou own or have an interest in farmland, list it in Part 1.	wn or Have an Interest In.	
46.	_ `	own or have any legal or equitable interest in any farm- or	commercial fishing-related property?	
	_	Go to Part 7.		
	☐ Yes.	Go to line 47.		
Ра	rt 7:	Describe All Property You Own or Have an Interest in That You D	id Not List Above	
		have other property of any kind you did not already list?  les: Season tickets, country club membership		
		Give specific information		
54	. Add t	he dollar value of all of your entries from Part 7. Write that	number here	\$0.00

Official Form 106A/B Schedule A/B: Property page 5

**Robert Ryan Pike** Debtor 1 Debtor 2 Paige Laken Pike Case number (if known) Part 8: List the Totals of Each Part of this Form 55. Part 1: Total real estate, line 2 \$0.00 56. Part 2: Total vehicles, line 5 \$31,976.00 57. Part 3: Total personal and household items, line 15 \$1,600.00 58. Part 4: Total financial assets, line 36 \$10,178.00 59. Part 5: Total business-related property, line 45 \$0.00 60. Part 6: Total farm- and fishing-related property, line 52 \$0.00 Part 7: Total other property not listed, line 54 \$0.00 Total personal property. Add lines 56 through 61... \$43,754.00 Copy personal property total 62. \$43,754.00 63. Total of all property on Schedule A/B. Add line 55 + line 62 \$43,754.00

	Robert Ryan Pike			
In re	Paige Laken Pike		Case No.	
		Debtor(s)		

## **SCHEDULE A/B - PROPERTY**

### Attachment A

The values listed with regard to all items represent the debtor's best estimate of the fair market value in their used and "as is" condition, to a willing buyer. None of the values are intended to represent the replacement value, actual cash value or any other value of the listed items as defined by the debtor's homeowner's insurance policy or any other insurance policy.

Fill in this information to identify your case:					
Debtor 1	Robert Ryan Pike				
	First Name	Middle Name	Last Name		
Debtor 2	Paige Laken Pike				
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ban	kruptcy Court for the:	NORTHERN DISTRICT	OF ALABAMA		
Case number					
(if known)					Check if this is an amended filing

### Official Form 106C

# Schedule C: The Property You Claim as Exempt

4/22

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

#### Part 1: Identify the Property You Claim as Exempt

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
  - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
  - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the Amount of the exemption you claim portion you own		Specific laws that allow exemption	
	Copy the value from Schedule A/B	Check only one box for each exemption.		
2021 JEEP COMPASS Line from Schedule A/B: 3.1	\$21,663.00	•	\$0.00	Ala. Code §§ 6-10-6, 6-10-12
Ellie IIolii ochedale A.B. G.1			100% of fair market value, up to any applicable statutory limit	
2005 TOYOTA 4RUNNER Line from Schedule A/B: 3.2	\$6,313.00		\$0.00	Ala. Code §§ 6-10-6, 6-10-12
Line Ironi Schedule A.B. 5.2			100% of fair market value, up to any applicable statutory limit	
2023 KAWASAKI DIRTBIKE Line from Schedule A/B: 3.3	\$4,000.00		\$0.00	Ala. Code §§ 6-10-6, 6-10-12
Ellie IIolii oolilooda vyb. Glo			100% of fair market value, up to any applicable statutory limit	
HOUSEHOLD GOODS AND FURNISHINGS	\$875.00		\$875.00	Ala. Code §§ 6-10-6, 6-10-12
Line from Schedule A/B: <b>6.1</b>			100% of fair market value, up to any applicable statutory limit	
ELECTRONICS Line from Schedule A/B: 7.1	\$375.00		\$375.00	Ala. Code §§ 6-10-6, 6-10-12
Line from <i>Schedule Alb</i> . 111			100% of fair market value, up to any applicable statutory limit	

Official Form 106C

Schedule C: The Property You Claim as Exempt

page 1 of 2

**Robert Ryan Pike** Debtor 1 Paige Laken Pike Debtor 2 Case number (if known) Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B **WEARING APPAREL** Ala. Code §§ 6-10-6, \$350.00 \$350.00 Line from Schedule A/B: 11.1 6-10-126(a)(2) 100% of fair market value, up to any applicable statutory limit **CHECKING: VENMO** Ala. Code §§ 6-10-6, 6-10-12 \$1.00 \$1.00 Line from Schedule A/B: 17.1 100% of fair market value, up to any applicable statutory limit **CHECKING: CASH APP** Ala. Code §§ 6-10-6, 6-10-12 \$1.00 \$1.00 Line from Schedule A/B: 17.2 100% of fair market value, up to any applicable statutory limit **CHECKING: CB&S** Ala. Code §§ 6-10-6, 6-10-12 \$176.00 \$176.00 Line from Schedule A/B: 17.3 100% of fair market value, up to any applicable statutory limit 401(K): 401(K) 11 U.S.C. § 522(b)(3)(C) \$10,000.00 \$10,000.00 Line from Schedule A/B: 21.1 100% of fair market value, up to any applicable statutory limit

3.	Are you claiming a homestead exemption of more than \$189,050?
	(Subject to adjustment on 4/01/25 and every 3 years after that for cases filed on or after the date of adjustment.)
	■ No

- Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

  - Yes

Fill in this informat	ion to identify you	r case:				
Debtor 1	Robert Ryan Pik	ie.				
	First Name		ast Name			
	Paige Laken Pik		ast Name			
United States Bankr	uptcy Court for the:	NORTHERN DISTRICT OF ALABA	AMA			
0						
Case number (if known)					☐ Chec	k if this is an
					amer	ided filing
Official Forms	1000					
Official Form 1						
Schedule D	: Creditors	Who Have Claims Se	cure	d by Propert	у	12/15
		f two married people are filing together, but, number the entries, and attach it to the				
1. Do any creditors hav	ve claims secured by	your property?				
☐ No. Check thi	is box and submit th	nis form to the court with your other sch	nedules. Y	ou have nothing else t	o report on this form.	
	of the information b	·		<b>3</b>		
	ecured Claims					
		nore than one secured claim, list the creditor	r concretch	, Column A	Column B	Column C
for each claim. If more	than one creditor has	a particular claim, list the other creditors in lead order according to the creditor's name.		Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
2.1 1ST FRANKI	LIN	Describe the property that secures the	claim:	\$4,000.00	\$4,000.00	\$0.00
Creditor's Name		2023 KAWASAKI DIRTBIKE				
40000 110 40						
13830 US 43 RUSSELLVII		As of the date you file, the claim is: Chec	ck all that			
35653	,	apply.  Contingent				
Number, Street, City	y, State & Zip Code	☐ Unliquidated				
Who owes the debt?	Check one.	Disputed  Nature of lien. Check all that apply.				
Debtor 1 only		☐ An agreement you made (such as mort	gage or se	cured		
Debtor 2 only		car loan)				
■ Debtor 1 and Debto	or 2 only	☐ Statutory lien (such as tax lien, mechan	nic's lien)			
☐ At least one of the o	debtors and another	☐ Judgment lien from a lawsuit				
Check if this claim community debt	relates to a	Other (including a right to offset)				

Date debt was incurred \_

Last 4 digits of account number

Debtor 1 Robert Ryan Pike		Case number (if known)		
First Name Middle Na	ame Last Name			
Debtor 2 Paige Laken Pike First Name Middle Na	ame Last Name			
Filst Name ivildule N	ame Last Name			
2.2 HUGHES FEDERAL CREDIT INION	Describe the property that secures the claim:	\$23,000.00	\$21,663.00	\$1,337.00
Creditor's Name	2021 JEEP COMPASS			
P O BOX 11900 TUCSON, AZ 85734	As of the date you file, the claim is: Check all that apply.  Contingent			
Number, Street, City, State & Zip Code	☐ Unliquidated			
	☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
☐ Debtor 1 only	☐ An agreement you made (such as mortgage or s	ecured		
Debtor 2 only	car loan)			
■ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim relates to a community debt	Other (including a right to offset)			
Date debt was incurred	Last 4 digits of account number			
2.3 ONE MAIN	Describe the property that secures the claim:	\$8,000.00	\$6,313.00	\$1,687.00
2.3 ONE MAIN Creditor's Name	Describe the property that secures the claim:  2005 TOYOTA 4RUNNER	\$8,000.00	\$6,313.00	\$1,687.00
	2005 TOYOTA 4RUNNER  As of the date you file, the claim is: Check all that apply.	\$8,000.00	\$6,313.00	\$1,687.00
Creditor's Name  PO BOX 70915 CHARLOTTE, NC	2005 TOYOTA 4RUNNER  As of the date you file, the claim is: Check all that apply.  Contingent	\$8,000.00	\$6,313.00	\$1,687.00
PO BOX 70915 CHARLOTTE, NC 28272-0915	2005 TOYOTA 4RUNNER  As of the date you file, the claim is: Check all that apply.	\$8,000.00	\$6,313.00	\$1,687.00
Creditor's Name  PO BOX 70915 CHARLOTTE, NC 28272-0915  Number, Street, City, State & Zip Code	As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed		\$6,313.00	\$1,687.00
Creditor's Name  PO BOX 70915 CHARLOTTE, NC 28272-0915 Number, Street, City, State & Zip Code  Who owes the debt? Check one.	As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed Nature of lien. Check all that apply.		\$6,313.00	\$1,687.00
Creditor's Name  PO BOX 70915 CHARLOTTE, NC 28272-0915  Number, Street, City, State & Zip Code  Who owes the debt? Check one.  Debtor 1 only	As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed Nature of lien. Check all that apply.  An agreement you made (such as mortgage or s		\$6,313.00	\$1,687.00
Creditor's Name  PO BOX 70915 CHARLOTTE, NC 28272-0915  Number, Street, City, State & Zip Code  Who owes the debt? Check one.  Debtor 1 only Debtor 2 only	As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed Nature of lien. Check all that apply.  An agreement you made (such as mortgage or scar loan)		\$6,313.00	\$1,687.00
Creditor's Name  PO BOX 70915 CHARLOTTE, NC 28272-0915  Number, Street, City, State & Zip Code  Who owes the debt? Check one.  Debtor 1 only Debtor 2 only  Debtor 1 and Debtor 2 only	As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed Nature of lien. Check all that apply.  An agreement you made (such as mortgage or s car loan) Statutory lien (such as tax lien, mechanic's lien)		\$6,313.00	\$1,687.00
Creditor's Name  PO BOX 70915 CHARLOTTE, NC 28272-0915  Number, Street, City, State & Zip Code  Who owes the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a	As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed Nature of lien. Check all that apply.  An agreement you made (such as mortgage or s car loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit		\$6,313.00	\$1,687.00
Creditor's Name  PO BOX 70915 CHARLOTTE, NC 28272-0915  Number, Street, City, State & Zip Code  Who owes the debt? Check one.  Debtor 1 only Debtor 2 only  Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt  Date debt was incurred	As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed Nature of lien. Check all that apply.  An agreement you made (such as mortgage or s car loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Other (including a right to offset)  Last 4 digits of account number	ecured		\$1,687.00
Creditor's Name  PO BOX 70915 CHARLOTTE, NC 28272-0915  Number, Street, City, State & Zip Code  Who owes the debt? Check one.  Debtor 1 only Debtor 2 only  Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt  Date debt was incurred	As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed Nature of lien. Check all that apply.  An agreement you made (such as mortgage or s car loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Other (including a right to offset)  Last 4 digits of account number			\$1,687.00

### Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Official Form 106D

Additional Page of Schedule D: Creditors Who Have Claims Secured by Property

Ħ	ll in this inforn	nation to identify your c	ase:					
De	ebtor 1	Robert Ryan Pike						
		First Name	Middle Name		Last Name			
	ebtor 2	Paige Laken Pike						
(Sp	oouse if, filing)	First Name	Middle Name		Last Name			
Ur	nited States Ba	nkruptcy Court for the:	NORTHERN D	ISTRICT OF	ALABAMA			
٦	ase number							
	(nown)						ПС	heck if this is an
							a	mended filing
$\sim$	fficial Form	0.106E/E						
	fficial Forn		ha Hava H		ad Claima			40/4E
		JF: Creditors W						12/15
Sch left. nan	nedule D: Credit . Attach the Con ne and case nur	tory Contracts and Unexpi ors Who Have Claims Secu tinuation Page to this page nber (if known). II of Your PRIORITY Uns	red by Property. I e. If you have no i	f more space	is needed, copy the Par	t you need, fill it out,	number the en	tries in the boxes on the
1.	Do any credito	ors have priority unsecured	l claims against y	ou?				
	No. Go to P	art 2.						
	☐ Yes.							
Pa	art 2: List A	II of Your NONPRIORIT	/ Unsecured Cl	aims				
3.	Do any credito	ors have nonpriority unsec	ured claims again	st you?				
	☐ No. You have	ve nothing to report in this pa	rt. Submit this form	to the court v	with your other schedules.			
	Yes.							
4.	unsecured clair	r nonpriority unsecured cla m, list the creditor separately or holds a particular claim, lis	for each claim. Fo	r each claim lis	sted, identify what type of o	claim it is. Do not list cl	aims already inc	luded in Part 1. If more
								Total claim
4.1		ANKLIN FINANCIAL  Creditor's Name	La	st 4 digits of	account number			\$5,500.00
	320 W A	AVALON AVE		en was the d	debt incurred?			-
		E SHOALS, AL 35661 treet City State Zip Code		of the date v	you file the claim is: Che	ok all that apply		
		rred the debt? Check one.	AS	or the date y	ou file, the claim is: Chec	ж ан тпат арріу		
	☐ Debtor		п	Contingent				
	☐ Debtor	•		_				
	_	1 and Debtor 2 only		Unliquidated				
		it and Debtor 2 only	_	Disputed	IORITY unsecured claim			
				Student loans		•		
	debt	if this claim is for a comm		Obligations a	rising out of a separation a	greement or divorce th	nat you did not	
		m subject to offset?		ort as priority				
	■ No			·	sion or profit-sharing plans	, and other similar deb	ts	
	☐ Yes			Other. Specif	y OTHER			

Official Form 106 E/F

Schedule E/F: Creditors Who Have Unsecured Claims

Page 1 of 8

Paige Laken Pike	Case number (if known)	
AFFIRM	Last 4 digits of account number	\$300.0
Nonpriority Creditor's Name 650 CALIFORNIA ST FL 12 SAN FRANCISCO, CA 94108	When was the debt incurred?	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
☐ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
■ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify OTHER	
ALABAMA DEPT OF HUMAN RESOURCES	Last 4 digits of account number	\$1,500.00
Nonpriority Creditor's Name 50 N RIPLEY STREET MONTGOMERY, AL 36130	When was the debt incurred?	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
☐ Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	□ Unliquidated	
■ Debtor 1 and Debtor 2 only	□ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify OVERPAYMENT	
CARE CREDIT	Last 4 digits of account number	\$700.0
Nonpriority Creditor's Name GE MONEY PO BOX 960061	When was the debt incurred?	
ORLANDO, FL 32896-0061		
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
■ Debtor 1 and Debtor 2 only	☐ Disputed	
$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify OTHER	

OAGU NET UGA	Lord A. B. Maratana and a control of	4000
CASH NET USA Nonpriority Creditor's Name	Last 4 digits of account number	\$200.0
175 W JACKSON BLVD SUITE 600 CHICAGO, IL 60604	When was the debt incurred?	
Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
☐ Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
■ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	$\square$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify OTHER	
CB&S	Last 4 digits of account number	\$490.00
Nonpriority Creditor's Name PO BOX 910	When was the debt incurred?	
RUSSELLVILLE, AL 35653 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	,	
☐ Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
■ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify OTHER	
CREDIT ONE	Last 4 digits of account number	\$20.00
Nonpriority Creditor's Name PO BOX 98873 LAS VEGAS, NV 89193	When was the debt incurred?	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
■ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	$\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	Other. Specify OTHER	

Paige Laken Pike		
DIRECTV	Last 4 digits of account number	\$200.0
Nonpriority Creditor's Name PO BOX 78626 PHOENIX, AZ 85062-8626	When was the debt incurred?	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	• • • • • • • • • • • • • • • • • • • •	
☐ Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
■ Debtor 1 and Debtor 2 only	Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	Other. Specify OTHER	
HELEN KELLER HOSPITAL	Last 4 digits of account number	\$1,500.0
Nonpriority Creditor's Name PO BOX 610	When was the debt incurred?	<b>¥</b> 1,000 010
SHEFFIELD, AL 35660  Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	As of the date you file, the claim is. Check all that apply	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
■ Debtor 1 and Debtor 2 only	_ `	
_	☐ Disputed  Type of NONPRIORITY unsecured claim:	
At least one of the debtors and another	Student loans	
☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
■ No	Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify OTHER	
HUNTSVILLE HOSPITAL	Last 4 digits of account number	\$500.0
Nonpriority Creditor's Name 101 SIVLEY ROAD	When was the debt incurred?	
HUNTSVILLE, AL 35801  Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	As of the date you me, the drain is. Oneok an that appry	
☐ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
■ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	■ Other. Specify OTHER	

Paige Laken Pike	Case number (if known)	
MARINER FINANCE	Last 4 digits of account number	\$3,500.00
Nonpriority Creditor's Name 115 2ND AVE SE HAMILTON, AL 35570	When was the debt incurred?	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
■ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	$\square$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify OTHER	
NORTHWEST AL GAS DISTRICT Nonpriority Creditor's Name	Last 4 digits of account number	\$331.0
P O BOX 129 HAMILTON, AL 35570	When was the debt incurred?	
Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
■ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	Other. Specify OTHER	
OPP LOANS		\$1.500.0
Nonpriority Creditor's Name 130 E RANDOLPH ST SUITE 3400	Last 4 digits of account number  When was the debt incurred?	\$1,500.0
CHICAGO, IL 60601		
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
■ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	$\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify OTHER	

Paige Laken Pike	Case number (if known)	
PERFORMANCE FINANCE	Last 4 digits of account number	\$1.00
Nonpriority Creditor's Name 10509 PROFESSIONAL CIR Reno, NV 89521	When was the debt incurred?	
Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
☐ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
■ Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	Student loans	
☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify REPOSSESSION DEFICIENCY	
REGIONAL FINANCE	Last 4 digits of account number	\$2,500.0
Nonpriority Creditor's Name 2003 AVALON AVE MUSCLE SHOALS, AL 35661	When was the debt incurred?	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	7.2.4.4.4.4.4.4.4.4.4.4.4.4.4.4.4.4.4.4.	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
■ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
_	☐ Student loans	
☐ Check if this claim is for a community debt  Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
□ Yes	■ Other. Specify OTHER	
RUSSELLVILLE FINANCE	Lock 4 digite of account number	\$1,800.0
Nonpriority Creditor's Name 16109 HWY 43 SUITE A	Last 4 digits of account number  When was the debt incurred?	Ψ1,000.0
RUSSELLVILLE, AL 35654	As of the date you file the claim is Obselved that such	
Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	□ Continued	
Debtor 2 only	Contingent	
_	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecured claim:	
At least one of the debtors and another	Student loans	
Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	■ Other Specify OTHER	

Debto Debto	or 1 Robert Ryan Pike or 2 Paige Laken Pike	Case number (if known)	
4.1	RUSSELLVILLE HOSPITAL	Last 4 digits of account number	\$500.00
<i>'</i>	Nonpriority Creditor's Name PO BOX 1089	When was the debt incurred?	<u>-</u>
	RUSSELLVILLE, AL 35653		
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify OTHER	
1.1	SECURITY FINANCE	Last 4 digits of account number	\$1,500.00
	Nonpriority Creditor's Name		
	14001 HWY 43 RUSSELLVILLE, AL 35653	When was the debt incurred?	
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify OTHER	
4.1	TJMAXX	Last 4 digits of account number	\$90.00
·	Nonpriority Creditor's Name PO BOX 94014	When was the debt incurred?	******
	PALATINE, IL 60094-4014		
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	_	
	☐ Debtor 1 only	Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	lacksquare At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	Check if this claim is for a community	Student loans	
	debt	Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify OTHER	

TRACTOR SUPPLY	Last 4 digits of account number	\$1,320.0
Nonpriority Creditor's Name PO BOX 6403	When was the debt incurred?	
SIOUX FALLS, SD 57117 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
☐ Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
■ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	■ Other. Specify OTHER	

#### Part 3: List Others to Be Notified About a Debt That You Already Listed

#### Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				•	Total Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total claims					
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
					Total Claim
Total	6f.	Student loans	6f.	\$	0.00
claims from Part 2	6g.	Obligations arising out of a separation agreement or divorce that	6g.	\$	0.00
	6h.	you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	23,952.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	23,952.00

<sup>5.</sup> Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Fill in this infor	mation to identify your	case:		
Debtor 1	Robert Ryan Pike	•		
	First Name	Middle Name	Last Name	
Debtor 2	Paige Laken Pike	•		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ALABAMA	
Case number				
(if known)				Check if this is an amended filing

## Official Form 106G

## Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

P	erson or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code	State what the contract or lease is for
2.1	AARONS 1400 HWY 43 RUSSELLVILLE, AL 35653	FURNITURE
2.2	NOTICE TO ALL CREDITORS	All Contractual Provisions regarding arbitration and/or alternative dispute resolution are rejected.

Fill in this in	nformation to identify your	case:			
Debtor 1	Robert Ryan Pike	<b>,</b>			
Dalatan	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	Paige Laken Pike	Middle Name	Last Name		
United States	s Bankruptcy Court for the:	NORTHERN DISTRIC	T OF ALABAMA		
Case numbe	er			☐ Check if this is an	
				amended filing	
Official	Form 106H				
	ıle H: Your Cod	ehtors		12/1	5
Scriedo	ile II. Tour Gou	entoi 3		12/1	
ill it out, and your name a	d number the entries in the nd case number (if known)	boxes on the left. Attac . Answer every question	h the Additional Page to n.	on. If more space is needed, copy the Additional Pa this page. On the top of any Additional Pages, writ	
1. Do yo	ou have any codebtors? (If	you are filing a joint case,	do not list either spouse a	as a codebtor.	
■ No □ Yes					
	n the last 8 years, have you California, Idaho, Louisiana			? (Community property states and territories include ngton, and Wisconsin.)	
■ No. G	Go to line 3.				
☐ Yes. [	Did your spouse, former spo	use, or legal equivalent liv	e with you at the time?		
in line 2	e again as a codebtor only i 06D), Schedule E/F (Official	f that person is a guara	ntor or cosigner. Make s	if your spouse is filing with you. List the person shoure you have listed the creditor on Schedule D (Office). Use Schedule D, Schedule E/F, or Schedule G to	icial
	olumn 1: Your codebtor me, Number, Street, City, State and Z	P Code		Column 2: The creditor to whom you owe the de Check all schedules that apply:	bt
3.1				☐ Schedule D, line	
	ame			☐ Schedule E/F, line	
				☐ Schedule G, line	
	umber Street			-	
Cit	ty	State	ZIP Code		
3.2				☐ Schedule D, line	
	ame			☐ Schedule E/F, line	
				☐ Schedule G, line	
	umber Street			-	
Cit	ty	State	ZIP Code		

Official Form 106H Schedule H: Your Codebtors Page 1 of 1

Fill in this information	to identify your case:	
Debtor 1	Robert Ryan Pike	
Debtor 2 (Spouse, if filing)	Paige Laken Pike	
United States Bankrup	otcy Court for the: NORTHERN DISTRICT OF ALABAMA	
Case number (If known)		Check if this is: ☐ An amended filing ☐ A supplement showing postpetition chapter
Official Form	1061	13 income as of the following date:  MM / DD/ YYYY

### Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

#### Describe Employment Fill in your employment **Debtor 1** Debtor 2 or non-filing spouse information. ■ Employed Employed If you have more than one job, **Employment status** attach a separate page with ■ Not employed ■ Not employed information about additional employers. TRANSACTION SETTLEMENT Occupation **INSTALLER ANALYST** Include part-time, seasonal, or self-employed work. **Employer's name EXP** SHOALS OVERHEAD DOOR Occupation may include student or homemaker, if it applies. **Employer's address** 2402 WOODSIDE DRIVE 2219 RIMLAND DR SUITE 301 **MUSCLE SHOALS, AL 35661 BELLINGHAM, WA 98226** How long employed there? 1 WEEK 2 YEARS

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filling spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

For Debtor 1 For Debtor 2 or

				FOI DEDIOI I		filing spouse
2.	<b>List monthly gross wages, salary, and commissions</b> (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.	2.	\$	3,814.00	\$	3,914.00
3.	Estimate and list monthly overtime pay.	3.	+\$	0.00	+\$_	0.00
4.	Calculate gross Income. Add line 2 + line 3.	4.	\$	3,814.00	\$	3,914.00

Official Form 106l Schedule I: Your Income page 1

Case number (if known)

		For Debtor 1		For Debtor 2 or non-filing spouse							
	Cons	y line 4 here	4.		\$	2 04 4		noi \$			_
	Copy	y lille 4 fiele	4.		Ψ_	3,814	.00	Ψ_	ა,	914.00	_
5.	List	all payroll deductions:									
	5a.	Tax, Medicare, and Social Security deductions	5a.		\$	381	00	\$		403.00	1
	5b.	Mandatory contributions for retirement plans	5b.		\$		.00	\$		0.00	_
	5c.	Voluntary contributions for retirement plans	5c.		\$		.00	\$		156.00	_
	5d.	Required repayments of retirement fund loans	5d.		\$		.00	\$		0.00	_
	5e.	Insurance	5e.		\$		.00	\$		266.00	_
	5f.	Domestic support obligations	5f.		\$		.00	\$		0.00	_
	5g.	Union dues	5g.		\$		.00	\$		0.00	_
	5h.	Other deductions. Specify: LIFE	5h.		\$			+ \$		1.00	_
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$	381	.00	\$		826.00	<del>-</del> I
7.	Calc	ulate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$_	3,433	.00	\$_	3,	088.00	_ 
8.	List a 8a.	all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.		\$	0	.00	\$		0.00	_
	8b.	Interest and dividends	8b.		\$-		.00	\$-		0.00	_
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce			`-			· –			_
		settlement, and property settlement.	8c.		\$_		.00	\$_		0.00	_
	8d.	Unemployment compensation	8d.		\$_		.00	\$_		0.00	_
	8e.	Social Security	8e.		\$_	0	.00	\$_		0.00	<u></u>
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.		\$_		.00	\$_		0.00	_
	8g.	Pension or retirement income	8g.		\$_		.00	\$_			_
	8h.	Other monthly income. Specify:	_ 8h.	.+	\$_	0	.00	+ \$_		0.00	_
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	\$	0	.00	\$_		0.0	0
10.	Calc	ulate monthly income. Add line 7 + line 9.	10.	\$		3,433.00	+ \$	3,	088.00	= \$	6,521.00
	Add t	the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	L								
11.	Inclu- other	e all other regular contributions to the expenses that you list in Schedule de contributions from an unmarried partner, members of your household, your friends or relatives.  ot include any amounts already included in lines 2-10 or amounts that are not eify:	depe						Schedule 11.		0.00
12.		the amount in the last column of line 10 to the amount in line 11. The resent that amount on the Summary of Schedules and Statistical Summary of Certaines							12.	\$	6,521.00
										Combi	ned ly income
13.	Do y ■ □	ou expect an increase or decrease within the year after you file this form No.  Yes. Explain:	?								

Official Form 106l Schedule I: Your Income page 2

FIII	in this informa	ation to identify yo	our case:							
Deb	otor 1	Robert Ryan	Pike			Cł	neck	if this is:		
					_		Α	n amended filing		
	otor 2	Paige Laken	Pike						ving postpetition char	oter
(Spo	ouse, if filing)						1;	3 expenses as of	the following date:	
Unit	ed States Bank	ruptcy Court for the	: NORTH	HERN DISTRICT OF ALAB	AMA		M	M / DD / YYYY		
	e number nown)									
Of	fficial Fo	rm 106J								
Sc	chedule	J: Your	Exper	ises						12/15
Be info	as complete ormation. If m mber (if know	and accurate as nore space is ne n). Answer ever	possible eded, atta y questio	. If two married people ar ach another sheet to this						
		ribe Your House	hold							
1.	Is this a join									
	□ No. Go to									
	■ Yes. Doe	es Debtor 2 live	ın a separ	ate household?						
	■ N □ Y	-	st file Offic	ial Form 106J-2, <i>Expenses</i>	for Separate House	hold of D	ebto	r 2.		
2.	Do you hay	e dependents?	□ No							
۷.	Do not list Debter 1 and Eill out this information for D				Donandant's relati	Dependent's relationship to			Does dependent	
	Debtor 2.	ebior i and	■ Yes.	each dependent	Debtor 1 or Debtor		_	Dependent's age	live with you?	
	Do not state	the						21	□ No	
	dependents				SON			MONTHS	■ Yes	
									□ No	
									☐ Yes	
									□ No	
									☐ Yes	
									□ No	
									☐ Yes	
3.	expenses o yourself an	penses include of people other the d your depende	nts?	No I Yes						
Est exp app	imate your ex penses as of a plicable date.	a date after the l	our bankr bankrupto	uptcy filing date unless y ry is filed. If this is a supp	elemental <i>Schedule</i>					
the		h assistance an		government assistance i cluded it on Schedule I: \		- 1	_	Your expe	enses	
4.	The rental or home ownership expenses for your residence. Include first payments and any rent for the ground or lot.				nclude first mortgage	4.	\$		500.00	
	If not include	ded in line 4:								
	4a. Real e	estate taxes				4a.	\$		0.00	
		erty, homeowner's	s, or rente	r's insurance		4b.			0.00	
		•		upkeep expenses		4c.	\$		295.00	
	4d. Home	owner's associat	ion or con	dominium dues		4d.	\$		0.00	
5.	Additional I	mortgage payme	ents for y	<b>our residence,</b> such as ho	me equity loans	5.	\$	·	0.00	

Official Form 106J Schedule J: Your Expenses page 1

Debtor 2		Ryan Pike aken Pike			
6. <b>Ut</b> i	ilities:				
6a	. Electricity	, heat, natural gas	6a.	\$	559.00
6b	. Water, se	wer, garbage collection	6b.	\$	95.00
6c.	. Telephon	e, cell phone, Internet, satellite, and cable services	6c.	\$	535.00
6d	. Other. Sp	ecify: LAWNCARE	6d.	\$	216.00
7. <b>Fo</b>	od and hous	ekeeping supplies	7.	\$	995.00
8. <b>Ch</b>	ildcare and	children's education costs	8.	\$	650.00
9. <b>Cl</b> o	othing, laund	dry, and dry cleaning	9.	\$	207.00
10. <b>Pe</b>	rsonal care	products and services	10.	\$	95.00
		ental expenses	11.	\$	595.00
	ansportation on not include of	Include gas, maintenance, bus or train fare.	12.	\$	695.00
		clubs, recreation, newspapers, magazines, and books	13.	·	95.00
		tributions and religious donations	14.		0.00
	surance.	unbuttons and rengious donations	17.	Ψ	0.00
		nsurance deducted from your pay or included in lines 4 or 20.			
	a. Life insura	, , ,	15a.	\$	0.00
15	b. Health ins	surance	15b.		0.00
_	c. Vehicle in		15c.	·	189.00
		urance. Specify:	15d.	· ·	0.00
		nclude taxes deducted from your pay or included in lines 4 or 20.		<u> </u>	0.00
Sp	ecify:	* * *	16.	\$	0.00
		ease payments:	17a.	<b>c</b>	0.00
		ents for Vehicle 1		· -	0.00
		ents for Vehicle 2	17b.	*	0.00
	c. Other. Sp		17c.	·	0.00
	d. Other. Sp		17d.	\$	0.00
		s of alimony, maintenance, and support that you did not report a your pay on line 5, Schedule I, Your Income (Official Form 106I)		\$	0.00
		s you make to support others who do not live with you.	,-	\$	0.00
	ecify:	o you make to cappoin outline and not me min you.	19.		<u> </u>
		perty expenses not included in lines 4 or 5 of this form or on Sci		our Income.	
		s on other property	20a.		0.00
	b. Real esta	• • •	20b.	\$	0.00
20	c. Property.	homeowner's, or renter's insurance	20c.		0.00
		nce, repair, and upkeep expenses	20d.	·	0.00
		ner's association or condominium dues	20e.		0.00
	her: Specify:	ior o aboutation of contactifficatiff adoc	21.	·	0.00
		monthly expenses		-Ψ	0.00
	•	•		\$	F 724 00
	a. Add lines 4	22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2			5,721.00
				\$	
		a and 22b. The result is your monthly expenses.		\$	5,721.00
		monthly net income.		_	
		12 (your combined monthly income) from Schedule I.	23a.		6,521.00
23	b. Copy you	r monthly expenses from line 22c above.	23b.	-\$	5,721.00
23		your monthly expenses from your monthly income. t is your monthly net income.	23c.	\$	800.00
For mo	r example, do y odification to the	an increase or decrease in your expenses within the year after you expect to finish paying for your car loan within the year or do you expect you terms of your mortgage?			ase or decrease because of a
	No.				
	Yes.	Explain here:			

Elli in this inform							
Fill in this infor	mation to identify your	case:					
Debtor 1	Robert Ryan Pike		Loot	Nama			
Debtor 2		Middle Name	Last	Name			
(Spouse if, filing)	Paige Laken Pike	Middle Name	Last	Name			
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT (	OF ALABAN	ЛΑ			
Case number (if known)							Check if this is an amended filing
Official Forr		n Individual	Debto	or's	Schedules		12/15
f two married pe	eople are filing togethe	r, both are equally respon	sible for su	ıpplyir	ng correct information.		
obtaining money		n connection with a bankr			edules. Making a false state esult in fines up to \$250,00		
Sig	n Below						
Did you pa	y or agree to pay some	one who is NOT an attorn	ey to help	you fil	I out bankruptcy forms?		
■ No							
☐ Yes. I	Name of person						etition Preparer's Notice, nature (Official Form 119)
	alty of perjury, I declare e true and correct.	that I have read the summ	nary and so	hedul	es filed with this declaration	on and	
X /s/ Rob	bert Ryan Pike		X	/s/ Pa	aige Laken Pike		
	t Ryan Pike				Laken Pike		
	ire of Debtor 1				ture of Debtor 2		
Date .	June 11, 2024			Date	June 11, 2024		

Official Form 106Dec

**Declaration About an Individual Debtor's Schedules** 

Fill i	n this inforr	nation to identify your	case:								
Debt	or 1	Robert Ryan Pik		Loot Name							
Debt	or 2	Paige Laken Pik	Middle Name	Last Name							
	se if, filing)	First Name	Middle Name	Last Name							
Unite	ed States Ba	nkruptcy Court for the:	NORTHERN DISTRICT (	OF ALABAMA							
Case	number										
(if kno	wn)					heck if this is an mended filing					
		<u>rm 107</u>									
Sta	tement	of Financial	Affairs for Individ	duals Filing for B	ankruptcy	04/22					
					equally responsible for supper additional pages, write you						
numb	er (if know	n). Answer every ques	stion.								
Part	1: Give I	Details About Your Ma	rital Status and Where You	Lived Before							
1. \	What is you	r current marital statu	s?								
ı	Married										
Ī	□ Not mai										
2. I	During the I	uring the last 3 years, have you lived anywhere other than where you live now?									
	_										
ا ا	■ No □ Yes. List all of the places you lived in the last 3 years. Do not include where you live now.										
		it all of the places you if									
	Debtor 1:		Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there					
3. \	Nithin the I:	ast 8 years did you ey	ver live with a snouse or led	ial equivalent in a commun	ity property state or territory	(Community property					
					co, Texas, Washington and W						
ı	No										
Ī	_	ake sure you fill out <i>Sch</i>	nedule H: Your Codebtors (Ot	ficial Form 106H).							
Dont	O Funda	in the Courses of Vou									
Part	2 Ехріа	in the Sources of You	rincome								
F	Fill in the tota	al amount of income you	nployment or from operating use received from all jobs and a have income that you receive	all businesses, including part-		dar years?					
	_	ig a joint oase and you	navo moomo mat you receive	s together, not it offiny office the	ido. Dobioi 1.						
l I	□ No ■ You Fil	l in the detaile									
	Tes. Fil	I in the details.									
			Debtor 1		Debtor 2						
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)					
		of current year untiled for bankruptcy:	■ Wages, commissions, bonuses, tips	\$19,570.00	☐ Wages, commissions, bonuses, tips	\$0.00					
			☐ Operating a business		☐ Operating a business						

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Debtoi Debtoi		bert Ryar ige Laken			Cas	e number (if known)	
				Debtor 1		Debtor 2	
				Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		dar year: December	31, 2023 )	■ Wages, commissions, bonuses, tips	\$56,024.00	☐ Wages, commissions, bonuses, tips	\$0.00
				☐ Operating a business		☐ Operating a business	
		dar year be December		■ Wages, commissions, bonuses, tips	\$45,527.00	☐ Wages, commissions, bonuses, tips	\$0.00
				☐ Operating a business		☐ Operating a business	
				Debtor 1 Sources of income Describe below.	Gross income from each source (before deductions and	Debtor 2 Sources of income Describe below.	Gross income (before deductions and exclusions)
					exclusions)		and exclusions)
Part 3	List	Certain Pa	ayments Yo	u Made Before You Filed for	Bankruptcy		
6. Ar		Neither Dindividual  During the  No.  Yes	ebtor 1 nor primarily for 90 days bef Go to line List below paid that continclude	2's debts primarily consumer Debtor 2 has primarily consumer a personal, family, or househow fore you filed for bankruptcy, dispanding to the payment of the payment on 4/01/25 and every 3 years	Imer debts. Consumer debtald purpose."  d you pay any creditor a total d a total of \$7,575* or more into the for domestic support oblights bankruptcy case.	of \$7,575* or more?  n one or more payments and attions, such as child support a	the total amount you and alimony. Also, do
	Yes.	Debtor 1	or Debtor 2	or both have primarily consu	,		
		■ No.	Go to line	7.			
		□ Yes	List below include pa	each creditor to whom you pai yments for domestic support o or this bankruptcy case.			

**Total amount** 

paid

Dates of payment

Amount you still owe

Was this payment for ...

**Creditor's Name and Address** 

Debtor Debtor			Cas	se number (if known)			
<i>In</i> sof a b	ithin 1 year before you filed for bankrupto siders include your relatives; any general pa which you are an officer, director, person in business you operate as a sole proprietor. 1 imony.	artners; relatives of any gen control, or owner of 20% o	eral partners; partner r more of their voting	erships of which yo g securities; and a	ou are a general ny managing ag	I partner; corporations gent, including one fo	
	. 140						
Ir	nsider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for t	this payment	
ins	ithin 1 year before you filed for bankrupto sider? clude payments on debts guaranteed or cos		ments or transfer a	any property on a	ccount of a de	bt that benefited an	
-	No						
ات Ir	Yes. List all payments to an insider	Dates of payment	Total amount paid	Amount you still owe	Reason for t	this payment tor's name	
Dow 4	Identify Lagel Actions Developsions	as and Faraslasures	•				
Part 4:	Identify Legal Actions, Repossession	is, and Foreclosures					
Lis	ithin 1 year before you filed for bankruptest all such matters, including personal injury odifications, and contract disputes.  No Yes. Fill in the details.						
_	Case title	Nature of the case			Status of the case		
1 R	ST FRANKLIN FINANCIAL V COBERT PIKE SM 2024-83	SMALL CLAIMS	SMALL CLAIM COLBERT COL		■ Pending □ On appea □ Conclude		
	ithin 1 year before you filed for bankruptoneck all that apply and fill in the details below  No. Go to line 11.  Yes. Fill in the information below.		erty repossessed, f	oreclosed, garnis	shed, attached	, seized, or levied?	
С	reditor Name and Address	Describe the Property		Date		Value of the	
		Explain what happened	i			property	
			luding a bank or fir	nancial institution	ı, set off any a	mounts from your	
С	reditor Name and Address	Describe the action the	creditor took	Date taken	action was	Amount	
	ithin 1 year before you filed for bankrupto ourt-appointed receiver, a custodian, or a No Yes		erty in the possess			fit of creditors, a	

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

	btor 1 btor 2	Robert Ryan Pike Paige Laken Pike		Case number	(if known)				
Pa	rt 5:	List Certain Gifts and Contributions	S						
13.	Within 2 years before you filed for bankruptcy,  ■ No □ Yes. Fill in the details for each gift.  Gifts with a total value of more than \$600			lid you give any gifts with a total value of more t  Describe the gifts	han \$600 per person Dates you gave	? Value			
	Pers	person on to Whom You Gave the Gift and ress:			the gifts				
14.	<b>=</b> 1	n 2 years before you filed for bankru No Yes. Fill in the details for each gift or co		lid you give any gifts or contributions with a tota	al value of more than	\$600 to any charity?			
	Gifts more Char	s or contributions to charities that to e than \$600 rity's Name ress (Number, Street, City, State and ZIP Code)	otal	Describe what you contributed	Dates you contributed	Value			
Pa	rt 6:	List Certain Losses							
15.	or ga	n 1 year before you filed for bankrup mbling? No Yes. Fill in the details.	otcy or	since you filed for bankruptcy, did you lose any	thing because of the	it, fire, other disaster,			
	how the loss occurred Includ			the amount that insurance has paid. List pending ce claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property lost			
Pa	rt 7:	List Certain Payments or Transfers							
16.	Includ	ulted about seeking bankruptcy or p	reparin	d you or anyone else acting on your behalf pay on gar a bankruptcy petition?  s, or credit counseling agencies for services requires		rty to anyone you			
	Addı Ema	on Who Was Paid ress il or website address on Who Made the Payment, if Not Yo	ou	Description and value of any property transferred	Date payment or transfer was made	Amount of payment			
	CON FOU OF A	NSUMER FINANCIAL EDUCATIO INDATION AMERICA 5 5TH AVENUE SOUTH MINGHAM, AL 35222		FINANCIAL MANAGEMENT AND CREDIT COUNSELING	6/7/24	\$55.00			
17.	Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors?  Do not include any payment or transfer that you listed on line 16.								
		Yes. Fill in the details.			_				
	Pers Addi	on Who Was Paid ress		Description and value of any property transferred	Date payment or transfer was made	Amount of payment			

Debtor 1	Robert Ryan Pike
Debtor 2	Paige Laken Pike
8 Withi	n 2 vears before vou

Official Form 107

### Case number (if known)

18.	Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?  Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not								
	include gifts and transfers that you have already  No	listed on this statement							
	☐ Yes. Fill in the details.								
	Person Who Received Transfer Address	Description and v property transferr		paymer	ne any property or nts received or debts exchange	Date transfer was made			
	Person's relationship to you				<b>3</b> -				
19.	Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.)  No								
	☐ Yes. Fill in the details.								
	Name of trust	Description and v	alue of the prope	rty transfe	erred	Date Transfer was made			
Par	rt 8: List of Certain Financial Accounts, Ins	truments. Safe Deposit	Boxes, and Stor	age Units					
		aramonio, caro zopocii	. Doxoo, and otor	ago oo					
20.	Within 1 year before you filed for bankruptcy sold, moved, or transferred? Include checking, savings, money market, or	•				,			
	houses, pension funds, cooperatives, assoc  No				,,				
	Yes. Fill in the details.								
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of Type of account number instrument		unt or Date account was closed, sold, moved, or transferred		Last balance before closing or transfer			
21.	Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?								
	■ No □ Yes. Fill in the details.								
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had access to it?  Address (Number, Street, City, State and ZIP Code)		Describe the contents		Do you still have it?			
22.	Have you stored property in a storage unit or	r place other than your	home within 1 ye	ear before	you filed for bankrupto	:y?			
	■ No □ Yes. Fill in the details.								
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)		Describe the contents		Do you still have it?			
Par	rt 9: Identify Property You Hold or Control f	,							
23.			ude any property	you borro	wed from, are storing f	or, or hold in trust			
	■ No □ Yes. Fill in the details.								
	Owner's Name	Where is the prop	erty? D	escribe th	ne property	Value			
	Address (Number, Street, City, State and ZIP Code)	(Number, Street, City, S Code)							
Par	rt 10: Give Details About Environmental Info	rmation							
For	the purpose of Part 10, the following definition	ns apply:							

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Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 5

Debtor 1 Robert Ryan Pike
Debtor 2 Paige Laken Pike

Case number (if known)

regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? ☐ Yes. Fill in the details. Name of site Governmental unit Environmental law, if you Date of notice Address (Number, Street, City, State and know it Address (Number, Street, City, State and ZIP Code) ZIP Code) 25. Have you notified any governmental unit of any release of hazardous material? Yes. Fill in the details. Name of site Governmental unit Environmental law, if you Date of notice Address (Number, Street, City, State and know it Address (Number, Street, City, State and ZIP Code) ZIP Code) 26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. Yes. Fill in the details. **Case Title** Nature of the case Status of the Court or agency Case Number Name case Address (Number, Street, City, State and ZIP Code) Part 11: Give Details About Your Business or Connections to Any Business 27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time ☐ A member of a limited liability company (LLC) or limited liability partnership (LLP) ■ A partner in a partnership ■ An officer, director, or managing executive of a corporation ☐ An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. **Business Name** Describe the nature of the business **Employer Identification number** Address Do not include Social Security number or ITIN. (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. Nο Yes. Fill in the details below. Name **Date Issued** Address (Number, Street, City, State and ZIP Code)

toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or

Part 12: Sign Below

I have read the answers on this *Statement of Financial Affairs* and any attachments, and I declare under penalty of perjury that the answers

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 6

Debtor 1	Robert Ryan Pike		
Debtor 2	Paige Laken Pike	Case number (if know	vn)
with a bar		a false statement, concealing property, or obtaining money to \$250,000, or imprisonment for up to 20 years, or both.	or property by fraud in connection
/s/ Robe	rt Ryan Pike	/s/ Paige Laken Pike	
Robert I	Ryan Pike	Paige Laken Pike	_
Signature	e of Debtor 1	Signature of Debtor 2	
Date J	une 11, 2024	DateJune 11, 2024	_
	ttach additional pages to Your State	ment of Financial Affairs for Individuals Filing for Bankrupto	y (Official Form 107)?
No			
☐ Yes			
Did you p	ay or agree to pay someone who is r	not an attorney to help you fill out bankruptcy forms?	
No			
☐ Yes. Na	ame of Person Attach the Bank	kruptcy Petition Preparer's Notice, Declaration, and Signature (Of	fficial Form 119).

Fill in this information to identify your case:						
Debtor 1	Robert Ryan Pike					
Debtor 2 (Spouse, if filing)	Paige Laken Pike					
United States Bankruptcy Court for the: Northern District of Alabama						
Case number						

Check	Check as directed in lines 17 and 21:						
	According to the calculations required by this Statement:						
	1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3).						
•	<ol> <li>Disposable income is determined under 11 U.S.C. § 1325(b)(3).</li> </ol>						
	3. The commitment period is 3 years.						
	4. The commitment period is 5 years.						

☐ Check if this is an amended filing

### Official Form 122C-1

# **Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period**

10/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

#### Part 1: Calculate Your Average Monthly Income 1. What is your marital and filing status? Check one only. ☐ Not married. Fill out Column A, lines 2-11. ■ Married. Fill out both Columns A and B. lines 2-11. Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space. Column A Column B Debtor 1 Debtor 2 or non-filing spouse 2. Your gross wages, salary, tips, bonuses, overtime, and commissions (before all 3,914.00 3,814.00 payroll deductions). 3. Alimony and maintenance payments. Do not include payments from a spouse if 0.00 0.00 Column B is filled in. 4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Do not include payments from a spouse. Do not include payments 0.00 0.00 you listed on line 3. 5. Net income from operating a business, Debtor 1 profession, or farm \$ 0.00 Gross receipts (before all deductions) 0.00 Ordinary and necessary operating expenses 0.00 Copy here -> \$ 0.00 0.00 Net monthly income from a business, profession, or farm \$ 6. Net income from rental and other real property Debtor 1 0.00 \$ Gross receipts (before all deductions) 0.00 -\$ Ordinary and necessary operating expenses 0.00 Copy here -> \$ 0.00 0.00 Net monthly income from rental or other real property

Official Form 122C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

					Column A Debtor 1		Column B Debtor 2 c		
7.	Interest, c	lividends, and royalties			\$	0.00	\$	0.00	
	•	ment compensation			\$	0.00	\$	0.00	
		er the amount if you contend that th Security Act. Instead, list it here:	e amount received was a ben	efit under					
	For you		\$	0.00					
	For you	r spouse	\$	0.00					
	benefit und not include United Sta disability, of pay paid u does not e	or retirement income. Do not included the Social Security Act. Also, executive any compensation, pension, pay, attes Government in connection with or death of a member of the uniform nder chapter 61 of title 10, then included the amount of retired pay to ander any provision of title 10 other the	cept as stated in the next sen annuity, or allowance paid by a disability, combat-related in led services. If you received a lude that pay only to the exten which you would otherwise be	tence, do the jury or ny retired it that it	\$	0.00	\$	0.00	
	Do not inc received a domestic t United Sta disability, of	om all other sources not listed ab lude any benefits received under the s a victim of a war crime, a crime ag errorism; or compensation, pension tes Government in connection with or death of a member of the uniform in a separate page and put the total	e Social Security Act; paymen gainst humanity, or internation , pay, annuity, or allowance p a disability, combat-related in led services. If necessary, list	its al or aid by the jury or					
	_				\$	0.00	\$	0.00	
					\$	0.00	\$	0.00	
	Т	otal amounts from separate pages,	if any.	+	\$	0.00	\$	0.00	
11.		your total average monthly inconnn. Then add the total for Column A		\$	3,814.00	+ \$	3,914.00	= \$	7,728.00
Part	2: Det	ermine How to Measure Your De	ductions from Income						tal average onthly income
12. 13.	Copy you Calculate	r total average monthly income fr the marital adjustment. Check on	om line 11. e:					\$	7,728.00
	☐ You a	are not married. Fill in 0 below.							
	You a	are married and your spouse is filing	with you. Fill in 0 below.						
	Fill in depe Belov adjus	are married and your spouse is not the amount of the income listed in Indents, such as payment of the spour, specify the basis for excluding this timents on a separate page.	line 11, Column B, that was N use's tax liability or the spous s income and the amount of ir	e's suppoi	rt of someon	e other t	han you or you	ır depend	ents.
	ii uiis	adjustment does not apply, enter 0		\$					
				_					
				+\$					
		Total		\$	0.0	<u>0</u> c	opy here=>		0.00
14.	Your cur	rent monthly income. Subtract lin	e 13 from line 12.			_		\$	7,728.00
15.		e your current monthly income for py line 14 here=>						\$	7,728.00

Official Form 122C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

Debtor 1 Debtor 2	Robert Ryan Pike Paige Laken Pike		Case number (if known)			
	Multiply line 15a by 12 (the number of months in	a year).		<b>x</b> 12		
1	5b. The result is your current monthly income for the	year for this part of	the form	\$92,736.00_		
16. <b>Ca</b>	Iculate the median family income that applies to yo	ou. Follow these ste	eps:			
16	a. Fill in the state in which you live.	AL				
16	b. Fill in the number of people in your household.	3				
160	c. Fill in the median family income for your state and s To find a list of applicable median income amounts, instructions for this form. This list may also be avails	, go online using the		\$86,685.00_		
17. <b>Ho</b>	w do the lines compare?					
178	a. Line 15b is less than or equal to line 16c. Or 11 U.S.C. § 1325(b)(3). <b>Go to Part 3.</b> Do No.					
171	b. Line 15b is more than line 16c. On the top on 1325(b)(3). Go to Part 3 and fill out Calcul your current monthly income from line 14 about 15 and 1	lation of Your Disp				
Part 3:	Calculate Your Commitment Period Under 11 L	J.S.C. § 1325(b)(4)				
18. <b>Co</b>	py your total average monthly income from line 11	1.		\$ 7,728.00		
cor spo	duct the marital adjustment if it applies. If you are noted that calculating the commitment period under 11 puse's income, copy the amount from line 13.  a. If the marital adjustment does not apply, fill in 0 on I	se is not filing with you, and you	-\$0.00			
191	b. Subtract line 19a from line 18.			\$		
20. <b>Ca</b>	Iculate your current monthly income for the year.	Follow these steps:				
208	a. Copy line 19b			\$7,728.00		
	Multiply by 12 (the number of months in a year).			<b>x</b> 12		
201	b. The result is your current monthly income for the ye	ear for this part of the	e form	\$92,736.00_		
200	c. Copy the median family income for your state and s	size of household fro	om line 16c	\$ 86,685.00		
21.	How do the lines compare?					
	Line 20b is less than line 20c. Unless otherwis period is 3 years. Go to Part 4.	se ordered by the co	urt, on the top of page 1 of this form, che	eck box 3, The commitment		
	Line 20b is more than or equal to line 20c. Unl commitment period is 5 years. Go to Part 4.	less otherwise order	red by the court, on the top of page 1 of t	his form, check box 4, The		
Part 4:	Sign Below					
Ву	signing here, under penalty of perjury I declare that the	ne information on thi	is statement and in any attachments is tr	ue and correct.		
X /s	s/ Robert Ryan Pike	x	/s/ Paige Laken Pike			
R	obert Ryan Pike		Paige Laken Pike			
	ignature of Debtor 1		Signature of Debtor 2			
Da	te <u>June 11, 2024</u> MM / DD / YYYY		Date June 11, 2024 MM / DD / YYYY			
If v	rou checked 17a, do NOT fill out or file Form 122C-2					

Official Form 122C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

Debtor 1	Robert Ryan Pike		
	Paige Laken Pike	Case number (if known)	

If you checked 17b, fill out Form 122C-2 and file it with this form. On line 39 of that form, copy your current monthly income from line 14 above.

Fill in th	is information to	identify your case:				
Debtor 1	Robert R	yan Pike				
Debtor 2 (Spouse	. u.go =u	ken Pike				
United S	tates Bankruptcy (	Court for the: Northern District of Alabama	a			
Case nu (if known				☐ Check	k if this is an amende	d filing
Official F	orm 122C-2					
Chap	ter 13 Cal	culation of Your Dispos	sable Ir	ncome		04/22
		ill need your completed copy of <i>Chapter</i> ial Form 122C-1).	r 13 Stateme	ent of Your Current Monthly	Income and Calculati	ion of
space is additiona	needed, attach a Il pages, write yo	ate as possible. If two married people ar separate sheet to this form, Include the I ur name and case number (if known).				
Part 1:	Calculate You	r Deductions from Your Income				
the qu	estions in lines (	Service (IRS) issues National and Local S 5-15. To find the IRS standards, go online e available at the bankruptcy clerk's offi	e using the l			
expen	ses if they are higl	ounts set out in lines 6-15 regardless of you ner than the standards. Do not include any o uct any amounts that you subtracted from y	operating exp	penses that you subtracted from	om income in lines 5 an	
If your	expenses differ fr	om month to month, enter the average expe	ense.			
Note:	Line numbers 1-4	are not used in this form. These numbers a	pply to inforn	nation required by a similar fo	orm used in chapter 7 ca	ases.
5. <b>T</b>	he number of pe	ople used in determining your deduction	s from inco	me		
р	lus the number of	f people who could be claimed as exemptio any additional dependents whom you suppo le in your household.			3	
Natio	nal Standards	You must use the IRS National Stand	dards to ansv	ver the questions in lines 6-7.		
		d other items: Using the number of people edollar amount for food, clothing, and other		d in line 5 and the IRS Nation	al \$	1,700.00

Official Form 122C-2

**Out-of-pocket health care allowance:** Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for out-of-pocket health care. The number of people is split into two categories--people who are under 65 and people who are 65 or older--because older people have a higher IRS allowance for health car costs. If your actual expenses are

higher than this IRS amount, you may deduct the additional amount on line 22.

Peop	ple v	who are under 65 years of age									
	7a.	Out-of-pocket health care allowance per person	\$	79							
	7b.	Number of people who are under 65	Х	3							
	7c.	Subtotal. Multiply line 7a by line 7b.	\$ 2	237.00		Copy here	=> \$		237.00		
Peop	ple v	who are 65 years of age or older									
	7d.	Out-of-pocket health care allowance per person	\$	154							
	7e.	Number of people who are 65 or older	Х	0							
	7f.	Subtotal. Multiply line 7d by line 7e.	\$	0.00		Copy here	=> \$		0.00		
	7g.	Total. Add line 7c and line 7f			\$	237.00		Copy to	otal here=>	\$	237.00
Loca	al Sta	andards You must use the IRS Local Standards to	answer the	e questio	ns in lin	es 8-15.					
Base	ed o	n information from the IRS, the U.S. Trustee Prog	ram has di	vided th	e IRS L	ocal Standa	rd for	housir	ng for		
_	•	ing and utilities - Insurance and operating expens	202								
_		ing and utilities - Mortgage or rent expenses									
Тоа	nsw	rer the questions in lines 8-9, use the U.S. Trustee						using	the link s	pecified	in the
8.	Ηου	e instructions for this form. This chart may also busing and utilities - Insurance and operating expense dollar amount listed for your county for insurance a	<b>nses:</b> Using	g the nur	nber of			I in line	5, fill		794.00
		using and utilities - Mortgage or rent expenses:	a opola	.g oxpo							
	9a.	Using the number of people you entered in line 5, filisted for your county for mortgage or rent expenses		ar amou	nt		\$		779.00		
	9b.	Total average monthly payment for all mortgages a	nd other del	ots secu	red by y	our home.					
		To calculate the total average monthly payment, ad contractually due to each secured creditor in the 60 for bankruptcy. Next divide by 60.									
		Name of the creditor	Avera paym	age mor ient	nthly						
		-NONE-	\$								
		9b. Total average monthly paymen	t \$		0.00	Copy here=>	-\$_		0.00	Repeat to on line 3	his amount 3a.
	9c.	Net mortgage or rent expense.									
		Subtract line 9b (total average monthly payment) fro or rent expense). If this number is less than \$0, enter		mortgag	e	\$	7	79.00	Copy here=>	\$	779.00
10.	•	ou claim that the U.S. Trustee Program's division cts the calculation of your monthly expenses, fill				•	j is ind	correct	and	\$	0.00
	F٧	rolain why:									

ebtor 1 ebtor 2	Robert Ryan Pike Paige Laken Pike			Case number (if	known)		
11.	Local transportation expenses: Check the number of veh	icles for whic	h you claim	an ownership	or operating	g expense.	
	☐ 0. Go to line 14.						
	☐ 1. Go to line 12.						
	2 or more. Go to line 12.						
	Vehicle operation expense: Using the IRS Local Standard operating expenses, fill in the <i>Operating Costs</i> that apply for						484.00
	Vehicle ownership or lease expense: Using the IRS Loca You may not claim the expense if you do not make any loan more than two vehicles.						
Vel	Describe Vehicle 1: 2021 JEEP COMPASS	<b>.</b>					
120				\$	620.00		
	Ownership or leasing costs using IRS Local Standard			Φ	629.00		
13D.	Average monthly payment for all debts secured by Vehicle 1 Do not include costs for leased vehicles.	1.					
	To calculate the average monthly payment here and on line are contractually due to each secured creditor in the 60 mor bankruptcy. Then divide by 60.			t			
	Name of each creditor for Vehicle 1	Average payment	monthly				
	HUGHES FEDERAL CREDIT INION	\$\$	488.68				
	Total Average Monthly Payment	\$	488.68	Copy here => -	\$ 488	Repeat this amount on line 33b.	
13c.	Net Vehicle 1 ownership or lease expense Subtract line 13b from line 13a. if this number is less than \$6	0, enter \$0.		. \$	140.32	Copy net Vehicle 1 expense here => \$	140.32
Vel	nicle 2 Describe Vehicle 2: 2005 TOYOTA 4RUNN	IER					
13d.	Ownership or leasing costs using IRS Local Standard			\$	629.00		
	Average monthly payment for all debts secured by Vehicle 2 leased vehicles.	2. Do not incl	ude costs fo	r			
	Name of each creditor for Vehicle 2	Average payment	monthly				
	ONE MAIN	\$	220.95				
	Total average monthly payment	\$	220.95	Copy here => -\$	220.9	Repeat this amount on line 33c.	
104	Not Vakiela 2 aumarahin ar lagas aynang					Copy net	
131.	Net Vehicle 2 ownership or lease expense  Subtract line 13e from line 13d. if this number is less than \$6	0, enter \$0.		\$	408.05	Vehicle 2 expense here => \$	408.05
14.	Public transportation expense: If you claimed 0 vehicles Public Transportation expense allowance regardless of					 n the \$	0.00
	Additional public transportation expense: If you claimed also deduct a public transportation expense, you may fill in not claim more than the IRS Local Standard for <i>Public Trans</i>	what you beli					0.00

Official Form 122C-2

Oth		In addition to the expense of the following IRS categories		s listed above,	you are allowed your monthly expense	s for	
16.	self-employment taxes, socia	al security taxes, and Medic wever, if you expect to rece im the total monthly amount	care taxes	. You may inc refund, you m	d local taxes, such as income taxes, lude the monthly amount withheld from ust divide the expected refund by 12 for taxes.	\$	784.00
17.	Involuntary deductions: Th	ne total monthly payroll ded	uctions th	at your job red	quires, such as retirement		
	contributions, union dues, ar				44)	\$	0.00
		. ,,,,	•	•	1(k) contributions or payroll savings.	Ψ_	
18.	filing together, include paym	ents that you make for your life insurance on your depo	· spouse's	term life insu	e insurance. If two married people are rance. spouse's life insurance, or for any form	\$	0.00
19.	Court-ordered payments:				by the order of a court or		
	administrative agency, such					¢	0.00
	• •			• • • • • • • • • • • • • • • • • • • •	ou will list these obligations in line 35.	\$	
20.	Education: The total month		education	that is either r	equired:		
	as a condition for your job						2.22
	for your physically or mer	ntally challenged dependen	t child if n	o public educa	ation is available for similar services.	\$_	0.00
21.	<b>Childcare:</b> The total monthly Do not include payments for	, , , ,	-	,	itting, daycare, nursery, and preschool.	\$	650.00
22.		n and welfare of you or your	depende	nts and that is	amount that you pay for health care s not reimbursed by insurance or paid I entered in line 7.		050.00
	Payments for health insuran	ce or health savings accoun	nts should	l be listed only	in line 25.	\$	358.00
23.	for you and your dependents phone service, to the extent income, if it is not reimburse Do not include payments for	s, such as pagers, call waiti necessary for your health a d by your employer. basic home telephone, into	ng, caller and welfar ernet and	identification, e or that of yo cell phone ser	you pay for telecommunication services special long distance, or business cell ur dependents or for the production of vice. Do not include self-employment pount you previously deducted.	+\$	150.00
24.	Add all of the expenses all Add lines 6 through 23.	lowed under the IRS expe	nse allov	vances.		\$	6,484.37
Δda	litional Expense Deductions	These are additional d	leductions	allowed by th	a Maans Tast		
	·	Note: Do not include a	ny expen	se allowances	listed in lines 6-24.		
25.					<b>ses.</b> The monthly expenses for health y necessary for yourself, your spouse, o	or	
	Health insurance		\$	266.00			
	Disability insurance		\$	0.00			
	Health savings account		+\$	0.00			
	Total		\$	266.00	Copy total here=>	\$	266.00
			\$	266.00	Copy total here=>	\$	266.00
	Do you actually spend this to	otal amount?	\$	266.00	Copy total here=>	\$	266.00
	Do you actually spend this to	otal amount?	·	266.00	Copy total here=>	\$	266.00
26.	Do you actually spend this to  No. How much do you  Yes  Continuing contributions to continue to pay for the reason your household or member of	otal amount? ou actually spend? to the care of household of the care of household of the care of your immediate family wh	\$ or family in and suppose is unab	members. Th ort of an elder le to pay for s	e actual monthly expenses that you will ly, chronically ill, or disabled member of uch expenses. These expenses may		266.00
	Do you actually spend this to  No. How much do you  Yes  Continuing contributions to continue to pay for the reason your household or member of include contributions to an analyonetic against family with the contribution against family with the contribution and the contribution against family with the contribution against family with the contribution against family with the contribution and the contribution against family with the contribution and the contribution against family with the contribution and the contribution and the contribution are contributions.	otal amount? ou actually spend? on the care of household conable and necessary care of your immediate family who count of a qualified ABLE violence. The reasonably near a second to the count of a qualified ABLE violence.	\$ por family in and suppose is unab program. ecessary	members. Th ort of an elder le to pay for si 26 U.S.C. § 5. monthly expe	e actual monthly expenses that you will ly, chronically ill, or disabled member of uch expenses. These expenses may 29A(b)		
	Do you actually spend this to  No. How much do you  Yes  Continuing contributions to continue to pay for the reason your household or member of include contributions to an analyonetic against family with the contribution against family with the contribution and the contribution against family with the contribution against family with the contribution against family with the contribution and the contribution against family with the contribution and the contribution against family with the contribution and the contribution and the contribution are contributions.	otal amount? ou actually spend? of the care of household of the care of household of the care of your immediate family who count of a qualified ABLE of the reasonably not under the Family Violence.	\$ por family in and supportion is unab program. ecessary e Prevention	members. Th ort of an elder le to pay for si 26 U.S.C. § 5 monthly exper on and Service	e actual monthly expenses that you will ly, chronically ill, or disabled member of uch expenses. These expenses may 29A(b)		

Official Form 122C-2

btor 1 btor 2	Robert Ryan Pike Paige Laken Pike	Case number (if known)		
	Additional home energy costs. Your hom line 8.	ne energy costs are included in your insurance and operating expenses on		
	If you believe that you have home energy of 8, then fill in the excess amount of home en	costs that are more than the home energy costs included in expenses on lin nergy costs	е	
	You must give your case trustee document amount claimed is reasonable and necessary	ation of your actual expenses, and you must show that the additional ary.	\$	0.00
		dren who are younger than 18. The monthly expenses (not more than ependent children who are younger than 18 years old to attend a private or		
	You must give your case trustee document claimed is reasonable and necessary and r	ation of your actual expenses, and you must explain why the amount not already accounted for in lines 6-23.		
	* Subject to adjustment on 4/01/25, and even	ery 3 years after that for cases begun on or after the date of adjustment.	\$	0.00
		The monthly amount by which your actual food and clothing expenses are g allowances in the IRS National Standards. That amount cannot be more as in the IRS National Standards.		
	3	tional allowance, go online using the link specified in the separate so be available at the bankruptcy clerk's office.		
	You must show that the additional amount	claimed is reasonable and necessary.	\$	57.00
	Continuing charitable contributions. The instruments to a religious or charitable organization.	e amount that you will continue to contribute in the form of cash or financial anization. 11 U.S.C. § 548(d)(3) and (4).		
	Do not include any amount more than 15%	of your gross monthly income.	\$_	0.00
	Add all of the additional expense deducted Add lines 25 through 31.	tions.	\$	323.00
	, taaee =e teag e			
Dedu 33. F	uctions for Debt Payment for debts that are secured by an interest pans, and other secured debt, fill in lines	-		
Dedu 33. F	uctions for Debt Payment for debts that are secured by an interest pans, and other secured debt, fill in lines	s 33a through 33e.  nent, add all amounts that are contractually due to each secured		e monthly
Dedu 33. F	cuctions for Debt Payment for debts that are secured by an interest pans, and other secured debt, fill in lines of calculate the total average monthly paymeditor in the 60 months after you file for ba Mortgages on your home	s 33a through 33e.  nent, add all amounts that are contractually due to each secured inkruptcy. Then divide by 60.	Average payme	nt
Dedu 33. F	for debts that are secured by an interest bans, and other secured debt, fill in lines to calculate the total average monthly paymeditor in the 60 months after you file for ba Mortgages on your home  Copy line 9b here	s 33a through 33e.  nent, add all amounts that are contractually due to each secured		
33. F	cuctions for Debt Payment for debts that are secured by an interest bans, and other secured debt, fill in lines to calculate the total average monthly paymeditor in the 60 months after you file for band Mortgages on your home  Copy line 9b here  Loans on your first two vehicles	s 33a through 33e.  nent, add all amounts that are contractually due to each secured inkruptcy. Then divide by 60.		0.00
33. F 16 7 c 33a.	cor debts that are secured by an interest bans, and other secured debt, fill in lines to calculate the total average monthly paymeditor in the 60 months after you file for bath Mortgages on your home  Copy line 9b here  Loans on your first two vehicles  Copy line 13b here	s 33a through 33e.  nent, add all amounts that are contractually due to each secured inkruptcy. Then divide by 60.  =>		0.00 488.68
Dedu 33. F	cor debts that are secured by an interest bans, and other secured debt, fill in lines to calculate the total average monthly paymeditor in the 60 months after you file for bath Mortgages on your home  Copy line 9b here  Loans on your first two vehicles  Copy line 13b here	s 33a through 33e.  nent, add all amounts that are contractually due to each secured inkruptcy. Then divide by 60.		0.00
33. F 16 33a.	cor debts that are secured by an interest bans, and other secured debt, fill in lines to calculate the total average monthly paymeditor in the 60 months after you file for bath Mortgages on your home  Copy line 9b here  Loans on your first two vehicles  Copy line 13b here	s 33a through 33e.  nent, add all amounts that are contractually due to each secured inkruptcy. Then divide by 60.  =>		0.00 488.68
33. File 33a. 33a. 33b. 33c. 33d.	cor debts that are secured by an interest bans, and other secured debt, fill in lines to calculate the total average monthly paymeditor in the 60 months after you file for band Mortgages on your home  Copy line 9b here  Loans on your first two vehicles  Copy line 13b here  Copy line 13e here	s 33a through 33e.  nent, add all amounts that are contractually due to each secured inkruptcy. Then divide by 60.  =>		0.00 488.68
33. File 33a. 33a. 33b. 33c. 33d.	cor debts that are secured by an interest bans, and other secured debt, fill in lines to calculate the total average monthly paymeditor in the 60 months after you file for band Mortgages on your home  Copy line 9b here  Loans on your first two vehicles Copy line 13b here  Copy line 13e here  List other secured debts:	as 33a through 33e.  Ident, add all amounts that are contractually due to each secured inkruptcy. Then divide by 60.		0.00 488.68
33. File 33a. 33a. 33b. 33c. 33d.	cor debts that are secured by an interest bans, and other secured debt, fill in lines to calculate the total average monthly paymeditor in the 60 months after you file for band Mortgages on your home  Copy line 9b here  Loans on your first two vehicles Copy line 13b here  Copy line 13e here  List other secured debts:	s 33a through 33e.  Identify property that secures the debt  Does payment include taxes or insurance?		0.00 488.68
33. File 33a. 33a. 33b. 33c. 33d.	cor debts that are secured by an interest coans, and other secured debt, fill in lines to calculate the total average monthly paymereditor in the 60 months after you file for bath Mortgages on your home  Copy line 9b here  Loans on your first two vehicles  Copy line 13b here  Copy line 13e here  List other secured debts:  e of each creditor for other secured debt	as 33a through 33e.  Ident, add all amounts that are contractually due to each secured inkruptcy. Then divide by 60.	\$ \$	0.00 488.68
33. File 33a. 33a. 33b. 33c. 33d.	cor debts that are secured by an interest coans, and other secured debt, fill in lines to calculate the total average monthly paymereditor in the 60 months after you file for bath Mortgages on your home  Copy line 9b here  Loans on your first two vehicles  Copy line 13b here  Copy line 13e here  List other secured debts:  e of each creditor for other secured debt	as 33a through 33e.  Ident, add all amounts that are contractually due to each secured inkruptcy. Then divide by 60.	\$\$ \$\$	0.00 488.68
33. File 33a. 33a. 33b. 33c. 33d.	cor debts that are secured by an interest coans, and other secured debt, fill in lines to calculate the total average monthly paymereditor in the 60 months after you file for bath Mortgages on your home  Copy line 9b here  Loans on your first two vehicles  Copy line 13b here  Copy line 13e here  List other secured debts:  e of each creditor for other secured debt	s 33a through 33e.  Ident, add all amounts that are contractually due to each secured inkruptcy. Then divide by 60.    =>	\$ \$	0.00 488.68
33. File 33a. 33a. 33b. 33c. 33d.	cor debts that are secured by an interest coans, and other secured debt, fill in lines to calculate the total average monthly paymereditor in the 60 months after you file for bath Mortgages on your home  Copy line 9b here  Loans on your first two vehicles  Copy line 13b here  Copy line 13e here  List other secured debts:  e of each creditor for other secured debt	s 33a through 33e.  Ident, add all amounts that are contractually due to each secured inkruptcy. Then divide by 60.    =>	\$\$ \$\$	0.00 488.68
33. File 33a. 33a. 33b. 33c. 33d.	cor debts that are secured by an interest coans, and other secured debt, fill in lines to calculate the total average monthly paymereditor in the 60 months after you file for bath Mortgages on your home  Copy line 9b here  Loans on your first two vehicles  Copy line 13b here  Copy line 13e here  List other secured debts:  e of each creditor for other secured debt	as 33a through 33e.  Ident, add all amounts that are contractually due to each secured inkruptcy. Then divide by 60.	\$\$ \$\$	0.00 488.68

otor 2 Paig	oert Ryan Pike ge Laken Pike			Cas	e numb	er ( <i>if known</i> )			
	debts that you listed in lin				<del>)</del> ,				
	Go to line 35.								
☐ Yes.	State any amount that you listed in line 33, to keep po Next, divide by 60 and fill it	ssession of your property							
Name of the	e creditor	Identify property that se	ecures the debt		Total	cure amount		onthly cu	ire
-NONE-				\$			÷ 60 = \$		
						0.00	Copy		0.00
				Total	\$	0.00	here=>	\$	0.00
<b>□</b> 163.		Ill of these priority claims.		current or					
36. <b>Projecte</b> Current office of the Execution	ongoing priority claims, su Total amount of all past-ced monthly Chapter 13 plan multiplier for your district as if the United States Courts (for courtive Office for United State list of district multipliers that incli	ch as those you listed in I due priority claims n payment stated on the list issued b or districts in Alabama and s Trustees (for all other d	ine 19.  by the Administred North Carolina istricts).	rative a) or by	\$ \$ X	0.00 800.00 10.00	=	\$	0.00
Current of the Execution of the Current of the Execution	ongoing priority claims, su Total amount of all past-ored monthly Chapter 13 plan multiplier for your district as the United States Courts (focutive Office for United State	ch as those you listed in I due priority claims  n payment  stated on the list issued bor districts in Alabama and s Trustees (for all other dudes your district, go online up the may also be available at the	oy the Administrd North Carolina istricts).	rative a) or by	\$	800.00	=	·	0.00 80.00
Current of Office of the Execution To find a separate Average	ongoing priority claims, su Total amount of all past-ored monthly Chapter 13 plan multiplier for your district as the United States Courts (for cutive Office for United State list of district multipliers that inclinistructions for this form. This lis	ch as those you listed in I due priority claims  n payment  stated on the list issued bor districts in Alabama and s Trustees (for all other dudes your district, go online ust may also be available at the ense	oy the Administrd North Carolina istricts). Ising the link spece bankruptcy clerk	rative a) or by	\$ X	10.00	Copy tota	·	
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Current of Office of the Execution of th	ongoing priority claims, su Total amount of all past-or ed monthly Chapter 13 plan multiplier for your district as the United States Courts (for cutive Office for United State list of district multipliers that incli instructions for this form. This list monthly administrative expe	ch as those you listed in I due priority claims n payment stated on the list issued bor districts in Alabama and s Trustees (for all other dudes your district, go online ust may also be available at the ense	oy the Administrd North Carolina istricts). Ising the link spece bankruptcy clerk	rative a) or by	\$ X	10.00	Copy tota		80.00
Current of	ongoing priority claims, su Total amount of all past-or ed monthly Chapter 13 plan multiplier for your district as if the United States Courts (for cutive Office for United State list of district multipliers that incli instructions for this form. This list monthly administrative expenses I of the deductions for deb ctions from Income of the allowed deductions. ne 24, All of the expenses an	ch as those you listed in I due priority claims	by the Administred North Carolina istricts). Using the link spece bankruptcy clerker through 36.	rative a) or by	\$ X \$	10.00	Copy tota		80.00
Current of the Exect To find a separate Average  37. Add all Copy linexpens	ongoing priority claims, su Total amount of all past-or ed monthly Chapter 13 plan multiplier for your district as if the United States Courts (for cutive Office for United State list of district multipliers that incli instructions for this form. This list monthly administrative expenses I of the deductions for deb ctions from Income of the allowed deductions. ne 24, All of the expenses an	ch as those you listed in I due priority claims	by the Administred North Carolina istricts). Using the link spece bankruptcy clerker through 36.	rative a) or by cified in the k's office.	\$ X	10.00	Copy tota		80.00

Total deductions.....

7,597.00

Copy total here=>

7,597.00

	Robert Ryan F Paige Laken P			Ca	se nu	mber ( <i>if known</i> )		
Part 2:	Determine You	ur Disposable Income Under 11 U.S.C. § 13	325(b)(2)					
		rent monthly income from line 14 of Form Current Monthly Income and Calculation o					\$	7,728.00
<b>chil</b> disa rece	dren. The month ability payments for eived in accordan	oly necessary income you receive for supp ly average of any child support payments, fos or a dependent child, reported in Part I of For- ice with applicable nonbankruptcy law to the e- ended for such child.	ster care pa m 122C-1,	ayments, or that you	,	\$ 0	.00	
emp in 1	oloyer withheld fro	etirement deductions. The monthly total of a orm wages as contributions for qualified retirer h(7) plus all required repayments of loans from the contribution is \$362(b)(19).	ment plans	, as specified		\$0	0.00	
42. <b>Tot</b> a	al of all deduction	ons allowed under 11 U.S.C. § 707(b)(2)(A).	Copy line	38 here=	:>	\$7,597	.00_	
exp thei	enses and you har r expenses. You	ial circumstances. If special circumstances jave no reasonable alternative, describe the spenust give your case trustee a detailed explan ocumentation for the expenses.	pecial circu	ımstances ar	nd			
Describ	pe the special ci	rcumstances	Am	ount of exp	ense			
_			\$			_		
-			\$			_		
_			\$			_		
		Total	\$	0.00		opy ere=> \$	0.00	-
44. <b>Tot</b> a	al adjustments.	Add lines 40 through 43.		=>	\$	7,597.00	Copy here=> -	\$7,597.00
	-	thly disposable income under § 1325(b)(2)	<b>).</b> Subtract	line 44 from	line :	39.	\$	131.00
have time you	ange in income of e changed or are e your case will be filed your petition	ome or Expenses  or expenses. If the income in Form 122C-1 or virtually certain to change after the date you ele open, fill in the information below. For examon, check 122C-1 in the first column, enter line in when the increase occurred, and fill in the	filed your I ple, if the v 2 in the se	oankruptcy powages reportections and column	etitio ed ir n, ex	n and during the acreased after		
Form	Line	Reason for change	C	ate of change	9	Increase or decrease?	Amount	of change
☐ 122C ☐ 122C ☐ 122C ☐ 122C ☐ 122C ☐ 122C	2 1					☐ Increase ☐ Decrease ☐ Increase ☐ Decrease ☐ Increase ☐ Increase ☐ Decrease	\$ \$ \$	
☐ 122C						☐ Increase☐ Decrease	\$	

Debtor 1 Debtor 2	Robert Ryan Pike Paige Laken Pike	_	Case number (if known)
Part 4:	Sign Below		
E	By signing here, under penalty of perjury you declare that the inform	ation	on this statement and in any attachments is true and correct.
X.	/s/ Robert Ryan Pike Robert Ryan Pike	X	/s/ Paige Laken Pike Paige Laken Pike
Data	Signature of Debtor 1	<b>-</b>	Signature of Debtor 2
Date	MM / DD / YYYY	Date	MM / DD / YYYY

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

## The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation	
\$245	filing fee	
\$78	administrative fee	
+ \$15	trustee surcharge	
\$338	total fee	

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their non-exempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

### **Chapter 11: Reorganization**

\$1,167 filing fee

\$571 administrative fee

\$1,738 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

# Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$78	administrative fee
_	\$278	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$78	administrative fee
	\$313	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/forms/bankruptcy-forms

### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

#### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

# Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://www.uscourts.gov/services-forms/bankruptcy/cre">http://www.uscourts.gov/services-forms/bankruptcy/cre</a> dit-counseling-and-debtor-education-courses.

In Alabama and North Carolina, go to: <a href="http://www.uscourts.gov/services-forms/bankruptcy/cre">http://www.uscourts.gov/services-forms/bankruptcy/cre</a> dit-counseling-and-debtor-education-courses.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

### United States Bankruptcy Court Northern District of Alabama

In re	Robert Ryan Pike Paige Laken Pike		Case No.	
	gce.	Debtor(s)	Chapter	13
	DISCLOSURE OF COM	MPENSATION OF ATTOI	RNEY FOR DE	CBTOR(S)
C	tursuant to 11 U.S.C. § 329(a) and Fed. Bankr. Pompensation paid to me within one year before the rendered on behalf of the debtor(s) in contemple	he filing of the petition in bankruptcy,	, or agreed to be paid	to me, for services rendered or to
	For legal services, I have agreed to accept		\$	4,500.00
	Prior to the filing of this statement I have rec	eived	\$	0.00
				4,500.00
2. 7	The source of the compensation paid to me was:			
	■ Debtor □ Other (specify):			
3.	The source of compensation to be paid to me is:			
	■ Debtor □ Other (specify):			
4.	I have not agreed to share the above-disclosed	l compensation with any other person	unless they are memb	pers and associates of my law firm
	☐ I have agreed to share the above-disclosed corcopy of the agreement, together with a list of			
5.	n return for the above-disclosed fee, I have agree	ed to render legal service for all aspect	ts of the bankruptcy c	ase, including:
	. Analysis of the debtor's financial situation, and Preparation and filing of any petition, schedule			file a petition in bankruptcy;
C	. Representation of the debtor at the meeting of			rings thereof;
C	. [Other provisions as needed] (A) Counseling with the debtor;			
	(B) Preparing and filing the chapte (C) Attending the meeting(s) of cre the law firm of record must appear (D) Reviewing and filing claims and	editors and confirmation hearing , to comply with this requiremen	g(s) (the attorney o nt);	f record or an attorney with
	(E) Filing amendments, motions, a required pleadings;			eedings, or any other
	(F) Attending all hearings when red			
	(G) Assisting the debtor in petition compromises and to request appro	ing the Court to employ special	counsel, to seek	approval of settlements or
	(H) Vigorously pursuing all objection			behalf of the debtor to a final
	order or judgement; and (I) Vigorously defending all advers	ary proceedings filed against th	e debtor to a final	order or judgement.

By agreement with the debtor(s), the above-disclosed fee does not include the following service:

	Robert Ryan Pike	
In re	Paige Laken Pike	

Case No.		

Debtor(s)

## DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR(S)

(Continuation Sheet)

	CERTIFICATION			
I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) it this bankruptcy proceeding.				
June 11, 2024	/s/ Tanya H. McCalpin			
Date	Tanya H. McCalpin			
	Signature of Attorney			
	Bond, Botes, Sykstus, Tanner & McNutt, P.C.			
	121 S Court Street			
	Florence, AL 35630			
	256-760-1010 Fax: 256-760-1023			
	jaday@bondnbotes.com			
	Name of law firm			

## **United States Bankruptcy Court** Northern District of Alabama

**Robert Ryan Pike** 

In re	Paige Laken Pike		Case No.	
	Debtor(s)	Chapter	13	
	VEI	RIFICATION OF CREDITOR	R MATRIX	
Гhe ab	ove-named Debtors hereby verify	y that the attached list of creditors is true and	correct to the best	of their knowledge.
Date: June 11, 2024	June 11, 2024	/s/ Robert Ryan Pike		
		Robert Ryan Pike		
	Signature of Debtor			
Date: _	June 11, 2024	/s/ Paige Laken Pike		
		Paige Laken Pike		

EXPERIAN PO BOX 2002 ALLEN, TX 75013 AFFIRM 650 CALIFORNIA ST FL 12 SAN FRANCISCO, CA 94108 MARINER FINANCE 115 2ND AVE SE HAMILTON, AL 35570

EQUIFAX INFORMATION SERVICES, LLOALABAMA DEPT OF HUMAN RESOURCES RTHWEST AL GAS DISTRICT

PO BOX 740256 ATLANTA, GA 30374 50 N RIPLEY STREET MONTGOMERY, AL 36130 P O BOX 129 HAMILTON, AL 35570

TRANSUNION PO BOX 2000 CHESTER, PA 19022 CARE CREDIT GE MONEY PO BOX 960061 ORLANDO, FL 32896-0061 OPP LOANS 130 E RANDOLPH ST SUITE 3400 CHICAGO, IL 60601

CHEXSYSTEMS
ATTN: CONSUMER RELATIONS
7805 HUDSON ROAD, SUITE 100
WOODBURY, MN 55125

CASH NET USA 175 W JACKSON BLVD SUITE 600 CHICAGO, IL 60604 PERFORMANCE FINANCE 10509 PROFESSIONAL CIR Reno, NV 89521

1ST FRANKLIN 13830 US 43 RUSSELLVILLE, AL 35653

CB&S PO BOX 910 RUSSELLVILLE, AL 35653 REGIONAL FINANCE 2003 AVALON AVE MUSCLE SHOALS, AL 35661

HUGHES FEDERAL CREDIT INION P O BOX 11900 TUCSON, AZ 85734 CREDIT ONE PO BOX 98873 LAS VEGAS, NV 89193 RUSSELLVILLE FINANCE 16109 HWY 43 SUITE A RUSSELLVILLE, AL 35654

ONE MAIN PO BOX 70915 CHARLOTTE, NC 28272-0915 DIRECTV PO BOX 78626 PHOENIX, AZ 85062-8626

RUSSELLVILLE HOSPITAL PO BOX 1089 RUSSELLVILLE, AL 35653

1ST FRANKLIN FINANCIAL 320 W AVALON AVE MUSCLE SHOALS, AL 35661 HELEN KELLER HOSPITAL PO BOX 610 SHEFFIELD, AL 35660 SECURITY FINANCE 14001 HWY 43 RUSSELLVILLE, AL 35653

AARONS 1400 HWY 43 RUSSELLVILLE, AL 35653 HUNTSVILLE HOSPITAL 101 SIVLEY ROAD HUNTSVILLE, AL 35801

PO BOX 94014 PALATINE, IL 60094-4014

**TJMAXX** 

TRACTOR SUPPLY PO BOX 6403 SIOUX FALLS, SD 57117